

Fleet Vehicle Safety Checklist

Vehicle & Inspection Details

Vehicle Make/Model:

Vehicle ID/Number:

License Plate:

Date:

Odometer Reading:

Inspector Name:

Time:

Checklist

Item	Pass	Fail	Comments/Repairs Needed
Brakes			
Lights (Headlights, Brake, Turn Signals)			
Tires (Condition & Pressure)			
Mirrors			
Windshield/Wipers			
Fluids (Oil, Coolant, Washer, etc.)			
Horn			
Steering			
Seat Belts			
Emergency Equipment (Triangle, Fire Extinguisher, etc.)			

Additional Notes

Inspector Signature

Supervisor Signature