

# Private Passenger and Light Duty Truck Vehicle Condition Report

Driver:

Date:

Vehicle Number or VIN:

Date of Last Oil Change:

License Number:

Odometer Reading:

S=Satisfactory U=Unsatisfactory – Comment Made

Item(s)	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Comments
<b>Brakes</b>								
Foot								
Parking								
<b>Tires / Wheels</b>								
Tread Depth (2/32 min)								
Rotation / Balance								Date: _____ Mileage: _____
Alignment								
Pressure								
Spare Tire / Pressure								
<b>Lights</b>								
Head Lights								
Tail Lights								
Stop Lights								
Directional Lights								
Emergency Flashers								
Back Up Lights								
Turn Signals								
Dome Lights								
License Plate								
Dashboard								
<b>Windshield</b>								
Wiper Condition								
Washer Fluid								
Wiper Operation								
Defroster Operation								
<b>Mirrors</b>								
Side								
Rear								
<b>Exterior Body</b>								
Dents								
Scratches								
Paint								



Item(s)	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Comments
Suspension								
Excessive Play								
Seat Belts								
Condition								
Glass								
Windshield Cracks / Chips								
Side Glass								
Rear Glass								
Transmission								
Fluid Level								
Cooling								
Coolant Level								
Fan Belts								
Hoses								
Suitability for Season								
Electrical System								
Battery Charging Rate								
Terminal Corrosion								
Exhaust								
Muffler Condition								
Catalytic Converter								
Emergency Equipment								
Reflective Vest								
First Aid Kit								
Jack								
Engine								
Engine Oil Level								
Oil Change								Date: _____ Mileage: _____
Filter Change								Date: _____ Mileage: _____
Interior								
Seats								
Seat Adjustment								
Carpet								
Headliner								
Visors								
Horn								
Operational Condition								

Other Comments:

Driver's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_