

Driver and Proprietor
Vehicle Inspection Record and Checklist

Date Checks Completed:		Licence Plate No:	
Vehicle Make and Model:		Registration No:	

Item Checked:	Satisfactory (please ✓ as appropriate)	
	Yes	No
Fuel, Oil, and Water		
Handbrake/Footbrake		
Wheel Security (No nuts/Studs missing or loose)		
Tyres (Tread/Pressure)		
Lights, Reflectors, Horn (including Activated Warning Lights)		
Driver's Mirrors (intact and adjusted)		
Windscreen/Wipers/Washer		
All Seats and Seat Belts		
First Aid Box/Fire Extinguisher		
All Signage Internal/External and Plates (present and in good condition, including Roof Lights on Hackney Carriages)		
Body Panels/Paintwork		
Sundry Equipment i.e., Steps, Ramps, Wheelchair Anchor Straps, Swivel Seats		
Suspension/Steering i.e., any knocking or rattling? (Problems should be investigated immediately and necessary repairs carried out).		

I certify that the above checks have been completed. Any corrective action has been completed. The vehicle is/is not in a roadworthy condition.

Checks carried out by			
Name (please print):		Badge No:	
Signature:		Date:	

Proprietor of Vehicle			
Name (please print):		Contact No:	
Signature:		Date:	