VEHICLE INSPECTION CHECKLIST

Walk round the vehicle before the first journey of the day and tick every check.

Registration / plate: _____ **Make and model:** _____ **Fleet no.:** _____

Driver name: _____ **Date:** _____ **Time:** _____ **Odometer:** _____

Outside the vehicle

Check	OK	Defect	Notes
Lights and indicators - front	☐	☐	
Lights and reflectors - rear	☐	☐	
Brake lights and reversing light	☐	☐	
Number plates clean and readable	☐	☐	
Mirrors clean and secure	☐	☐	
Windscreen and glass - chips	☐	☐	
Wipers and washer jets	☐	☐	
Bodywork, doors and steps	☐	☐	
Tyre tread, walls and damage	☐	☐	
Tyre pressures	☐	☐	
Wheel nuts and wheel trims	☐	☐	
Fluid leaks under the vehicle	☐	☐	
Load area and doors secure	☐	☐	
Markings and warning signs	☐	☐	
Mud flaps and spray guards	☐	☐	
Fuel cap or charge point	☐	☐	

Cab and under the bonnet

Check	OK	Defect	Notes
Horn	☐	☐	
Seat belts and seats	☐	☐	
Steering and play	☐	☐	
Foot brake and parking brake	☐	☐	
Warning lights on the dash	☐	☐	
Gauges and speedometer	☐	☐	
Heater, demister and air con	☐	☐	
Fuel or charge level	☐	☐	
Engine oil level	☐	☐	
Coolant level	☐	☐	
Screen wash level	☐	☐	
Battery secure and clean	☐	☐	
Spare wheel, jack and tools	☐	☐	
Documents and first aid kit	☐	☐	
Warning triangle and hi-vis	☐	☐	
Cab clean, nothing loose	☐	☐	

Defects found - what it is, where it is and how bad

Vehicle fit to drive: ☐ Yes ☐ No - do not use **Defects reported to:** _____

Driver signature: _____ **Checked / repaired by:** _____ **Date:** _____