

Vehicle Inspection Form

IMPORTANT: Complete this form for every church vehicle every three (3) months and keep with church records. All repairs and maintenance must be completed before vehicle is placed in use.

Church Name:	City GCFA #					
District:						
Inspected By:	Sig	gnature:		Date: _		
Vehicle Information:						
V.I.N.:	Тур	oe: □Van	□Bus □Passenger C	ar/Truck	□Othe	ər
Year:	Make:		Model:			
1. Headlights	OK NR N	J/A 25.		OK	NR	N/A
 Parking Lights Tail Lights Brake Lights 		26. 27. 28.	Fire Extinguishers First Aid Kit Emergency Warning			
5. Directional Signals 6. Hazard Warning Signals 7. Clearance Lamps 8. Side Marker Lamps 9. Reflectors 10. Brakes 11. Steering Systems 12. Suspension 13. Windshield Wipers 14. Horns 15. Exhaust Systems 16. Fuel Systems 17. Engine Compartment 18. Service Door 19. Emergency Door 20. Emergency Exits 21. Inside Rearview Mirror 22. Outside Rearview Mirror 23. Side view Mirror		29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43.	Bumpers Stop Arm Drive Shaft Guards Neutral Safety Switch Tires Wheels Seating/Drive Seat Belt Interior Lights			