

Vehicle Inspection Form

Technician: _____

Customer Name: _____

R.O.# _____

Year: _____

Engine Size: _____

Make: _____

Fuel: F. I. Carb.

Model & Body Style: _____

Transmission: Automatic Manual

V.I.N.

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2WD 4WD

Production Date: Month ____ / Date ____

Power Steering Yes No

Antilock Brakes Yes No

Mileage: _____

Air Conditioning Yes No

INSPECTION CODE: S = SAFETY / R = RELIABILITY / E = ECONOMY / C = CONVENIENCE / A = APPEARANCE

	CODE	OK	NOTES
ENGINE:			
Plugs			
Wires			
Cap			
Rotor			
Fuel Filter			
Air Filter			
*Timing Belt			
*Engine Belt			
COOLING SYSTEM:			
Radiator			
Water Pump			
Fan Clutch			
Hoses			
Coolant			
Radiator Cap			
Thermostat			
DRIVE TRAIN:			
*Trans Fluid			
Clutch			
Differential			
Motor Mounts			
ELECTRICAL:			
Alternator			
Starter			
Battery			
Cables			

	CODE	OK	NOTES
BODY:			
Wipers			
Interior Lights			
*Exterior Lights			
BRAKES:			
*Front			
*Rear			
*Calipers			
Rotors/Drums			
Hoses			
*Wheel Cylinders			
*Master Cylinder			
SUSPENSION:			
Shocks/Struts			
CV Joint/Boot			
*Ball Joints			
*Tie Rods			
Alignment			
Tires			
EXHAUST SYSTEM:			
Muffler			
Pipes			
Converter			
AIR CONDITIONING:			
Hoses			
Compressor			
Condenser			
Evaporator			
Temp Output			