

**ANNUAL VEHICLE INSPECTION**

VEHICLE ID	
ODOMETER READING	
INSPECTION DATE	
CERTIFIED MECHANIC	(NAME of ASE-certified mechanic)
	(COMPANY NAME: e.g., Buckeye Auto Repair Shop)
	(ADDRESS)
	(SIGNATURE)

GENERAL EMERGENCY EQUIPMENT	Yes	No
Horn operates properly?		
3 red reflectors stored in vehicle?		
5-lb. ABC fire extinguisher secured in vehicle?		

BRAKES	Yes	No
Emergency brake properly mounted, properly lubricated, properly operating, and not dangerously worn?		
Brake lines free of crimps, rust, breaks in integrity, and not in contact with inappropriate vehicle components (e.g., an exhaust pipe)?		
If using vacuum-assisted brakes, wheel cylinder, master cylinder, hydrovac, and hose connections are free of fluid leaks?		
If using air brakes, reservoirs, chambers, valves, connections, and lines are free of air leaks?		
Brake pads meet vehicle manufacturer's specifications during inspection?		
All moisture ejection valves are free of leaks and in proper working order?		

EMERGENCY DOOR (for bus-type vehicles)	Yes	No
Opens to maximum width without catching or binding?		
Free of obstructions?		
Free of padlocks or other security devices while vehicle is in motion?		
Each handle permanently installed?		
Operating instructions permanently affixed to inside of door?		
Safety buzzer sounds when door opens?		
Safety buzzer placed in driver's area?		

HEATER and DEFROSTER	Yes	No
Heater, defroster, and AC operate properly?		
Each hose in good state (e.g., no cracks/leaks)?		

BODY	Yes	No
Free of any broken part that could cause injury?		
Each window free of chips or cracks and securely mounted without exposed edges?		
No Plexiglas in place of safety glass?		

CHASSIS	Yes	No
The steering gear assembly, power steering unit, brackets, and mounting bolts securely fastened?		
Steering column moves less than 1/2 an inch when pulled upwards?		
Power steering operates properly and has correct fluid levels and belt tensions?		
Tie rod ends function properly?		
Each tire has full range-of-motion without rubbing chassis or body?		
Each tire has at least 1/16 <sup>th</sup> of an inch of tread?		
Steering axle free of retreaded tires?		
Each tire free of irregular wear, a cut, or a bruise?		
Each tire balanced?		
Each wheel aligned?		
Each lug nut present and properly tightened?		
Each shock/spring properly mounted and intact?		
Gas tank free of rust, damage, or a leak?		
Gas tank securely mounted?		
Exhaust system operates properly?		
Exhaust sections properly welded/clamped?		
Exhaust manifold free of cracks or missing bolts?		

VISIBILITY	Yes	No
Wipers and washer operate properly?		
Wiper blades in driver's field-of-vision clean?		
Wiper blades in working order?		
Rear-view mirror properly secured and properly placed?		
Each side-view mirror properly secured and properly placed?		
Convex blind-spot mirror installed?		
Each mirror reflects a clean image without cloudiness, a crack, or another obstacle?		
Each light operates properly?		

INTERIOR	Yes	No
Each seat securely fastened to floor?		
Seating area free of broken tubing, protruding metal, or debris?		
Floor made of metal?		
Floor intact and free of holes?		

Form  
**ODA0008**

(Rev. 12/2/2008)  
Ohio Department of Aging

**PRE-TRIP VEHICLE INSPECTION**

VEHICLE ID	LAST SIX DIGITS OF VIN	MAKE & MODEL

**EACH DRIVER\* SHALL CONDUCT AN INSPECTION ON THE FOLLOWING ITEMS BEFORE PROVIDING THE FIRST SERVICE OF THE DAY**

Week Of: <u>    </u> / <u>    </u> / <u>    </u> MM DD YYYY		SUN	MON	TUES	WED	THURS	FRI	SAT						
ODOMETER READING														
INSPECTION ITEMS		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
EXTERIOR	Ground under vehicle free of leaked fluids?													
	Auto body free of new damage?													
	Clean windows and mirrors?													
	Windshield wipers/washers appear OK?													
TIRES APPEAR OK?	Properly inflated?													
	Free of visible damage?													
UNDER THE HOOD <small>The driver shall check oil and belts before starting vehicle.</small>	Adequate clean oil?													
	Hoses appear OK? (e.g., no cracks, leaks)													
	Belts appear OK? (e.g., no fraying)													
	Adequate windshield washer fluid?													
ITEMS STORED IN VEHICLE?	Current, valid insurance ID card?													
	Current, valid vehicle registration?													
	Biohazard kit?													
	First-aid kit?													
	Seatbelt cutter?													
	Flares or reflective triangles?													
	Fire extinguisher?													
Blanket? (winter only)														
ITEMS INSPECTED FROM THE INTERIOR APPEAR OK?	Seat belts?													
	Seats hazard-free (tears, loose armrests)?													
	Floor free of hazards?													
	Clean interior?													
	Mirrors adjusted properly?													
	Doors operate from inside and outside?													
	Door locks?													
	Gauges? (e.g., oil, fuel, temp.)													
	Fuel level adequate?													
	No warning lights (e.g., check brakes) lit?													
	2-way communication device? (e.g., radio/cell)													
	Horn?													
	Back-up alarm (if equipped)?													
	Brakes?													
Heater, defroster, and AC?														
LIGHTS WORKING PROPERLY? <small>The driver shall use a second person to inspect lights that he/she cannot inspect. (e.g., brake lights and back-up lights)</small>	Each headlight (high & low beam)?													
	Each tail light and marker light?													
	Each brake light?													
	Each turn signal?													
	Each back-up light?													
	Hazard lights (front and rear)?													
	License plate light?													
Interior lights?														
If equipped WHEELCHAIR LIFT and RAMP APPEAR OK?	Operate through complete cycle?													
	Properly secured to vehicle?													
	Proper number of restraints?													
	Free of physical damage or leaking fluid?													
	Free of dirt, mud, gravel, salt, etc.?													
Lack need for repair?														

\*No two drivers should use the same form. If two drivers use the same vehicle for the service, each driver should complete a separate form.

DRIVER	(PRINT NAME)
	(SIGNATURE)