

## DAILY INSPECTION / MILEAGE / REQUEST FOR REPAIR REPORT

**DATE:**

**VEHICLE NUMBER:**

Trip Number	1	2	3	4	5	Request for Repair																			
<b>UNDER THE HOOD</b>						<b>Driver making request:</b>																			
Fluid levels, any leaks?						<b>Describe problem:</b>																			
Battery connections																									
Belt & hose condition																									
<b>IN THE DRIVER'S SEAT</b>																									
Driver's seat & seat belt						<b>Action taken:</b>																			
Horn																									
Gauges & indicator lights																									
Heating & cooling																									
Brake warning light																									
Check brakes (Fade test)																									
Emergency brake test						<b>Repaired by:</b>																			
<b>INSIDE THE VEHICLE</b>						<b>Date:</b>																			
Bus clean – free of trash						<b>Every driver's full signature:</b> _____ <b>and initials:</b> _____																			
Fire extinguisher – check expiration date & charge																									
First aid kit and spare fuses																									
Reflectors																									
Seats and seat belts																									
All emergency doors & windows open?																									
All interior lights																									
<b>OUTSIDE THE VEHICLE</b>																									
Body, bumper and mirrors																									
All brake, tail & turn signals																									
Head & clearance lights																									
Tires, wheels & lug nuts																									
All doors open?						<b>Inspection codes – X = Okay; O = Needs attention</b>																			
General condition of vehicle																									
Vehicle is level																									
<b>BEFORE PASSENGERS BOARD</b>						<b>Special Codes/Instructions:</b>																			
Two complete stops						Passengers – D=Disabled; WC=Wheelchair; E=Elderly; O=Other (staff, etc.)																			
Lift working and free of leaks						Enter passengers in the proper category – only one category/person.																			
<b>AFTER TRIP ENDS</b>						<b>Program/Purpose – The destination/program and purpose of the trip</b>																			
Post trip inspection																									
<b>FUEL PURCHASE</b>	<b>Mileage:</b>					<b>Gallons:</b>					<b>Cost:</b>														
<b>DAILY MILEAGE</b>																									
Trip #	1					2					3					4					5				
Start Miles																									
End Miles																									
Start Time																									
End Time																									
Total Time																									
Program & Purpose																									
Total Passengers	D	WC	E	O	D	WC	E	O	D	WC	E	O	D	WC	E	O	D	WC	E	O	D	WC	E	O	
Passenger List (Last name, First Initial)																									
(Continue on reverse if necessary)																									