

**COLORADO DEPARTMENT OF TRANSPORTATION
DRIVER'S VEHICLE INSPECTION REPORT**

In compliance with 49CFR 396.11&13 of the Federal Motor Carrier Safety Regulations

Carrier: Colorado Department of Transportation			
Address:		City:	Zip code:
<input type="checkbox"/> PRE-TRIP	Date:	Time:	<input type="radio"/> POST TRIP
Odometer reading (miles):		Starting mileage:	Ending mileage:

Check any defective item and give details under "Remarks". Check the for Pre-Trip, and the for Post Trip inspection.

A. Tractor/Truck number: **Bold** items are red tag offenses recognized by FMCSR; repair before using vehicle.

Vehicle preview
 Begin with a walk around using the previous Post Trip inspection

Engine
 Fluid leaks Battery Radiator Engine Starter
 All fluid levels Transmission

Cab
 Oil pressure Windshield Windows Wiper blades Mirrors
 Clutch Dash lights Horn Spare bulbs & fuses All instrument gauges
 Fire extinguisher First aid kit Triangles/flags/flares Heater/Defroster Seatbelts

Walk-around
 Body Back-up alarm Steps, handles Coupling devices Mud flaps
 Fuel tanks Tire chains Rear end Fluid leaks Tarpaulin
 Tires Muffler Suspension system Drive line Wheels and rims
 Lug nuts Front axle Exhaust system Frame & assembly Steering Mechanism

Lights
 Brake lights Warning lights Reflectors Head lights Turn signals

Brake system
 Air lines Brake accessories Parking brakes Air compressor Service brake
 Brake lining thickness _____ Slack adjuster travel measurements _____
 Other:

B. Trailer(s) number(s): Starting mileage (from hub):

<input type="checkbox"/> <input type="radio"/> Brake connections	<input type="checkbox"/> <input type="radio"/> Brakes	<input type="checkbox"/> <input type="radio"/> Tires	<input type="checkbox"/> <input type="radio"/> Coupling device	<input type="checkbox"/> <input type="radio"/> Doors
<input type="checkbox"/> <input type="radio"/> Hitch	<input type="checkbox"/> <input type="radio"/> Landing gear	<input type="checkbox"/> <input type="radio"/> Lights - all	<input type="checkbox"/> <input type="radio"/> Roof	<input type="checkbox"/> <input type="radio"/> Tarpaulin
<input type="checkbox"/> <input type="radio"/> Suspension system	<input type="checkbox"/> <input type="radio"/> Wheels and rims	<input type="checkbox"/> <input type="radio"/> Lug nuts	<input type="checkbox"/> <input type="radio"/> Coupling (king) pin	
<input type="checkbox"/> <input type="radio"/> Attenuator bolts	<input type="checkbox"/> <input type="radio"/> Attenuator pins	<input type="checkbox"/> <input type="radio"/> Other:		

C. Aerial device - inspection of vehicle component is accomplished in the "Tractor/Truck" section:

<input type="checkbox"/> <input type="radio"/> Fluid leaks	<input type="checkbox"/> <input type="radio"/> Fasteners	<input type="checkbox"/> <input type="radio"/> All fluid levels	<input type="checkbox"/> <input type="radio"/> Power take-off	<input type="checkbox"/> <input type="radio"/> Liner
<input type="checkbox"/> <input type="radio"/> Outriggers	<input type="checkbox"/> <input type="radio"/> Hydraulic system	<input type="checkbox"/> <input type="radio"/> Retaining pins	<input type="checkbox"/> <input type="radio"/> Welds	<input type="checkbox"/> <input type="radio"/> Bucket
<input type="checkbox"/> <input type="radio"/> Fiberglass extension	<input type="checkbox"/> <input type="radio"/> Safety belts & straps	<input type="checkbox"/> <input type="radio"/> Test ground controls		
<input type="checkbox"/> <input type="radio"/> Test bucket lift controls	<input type="checkbox"/> <input type="radio"/> Other:			

Remarks:

CONDITION OF THE ABOVE VEHICLE IS SATISFACTORY

Pre-trip driver's printed name:	Post trip driver's printed name:
Pre-trip driver's signature:	Post trip driver's signature:

ABOVE DEFECTS NEED NOT BE CORRECTED FOR SAFE OPERATION OF THE VEHICLE
 ABOVE DEFECTS CORRECTED

Mechanic's signature:	Date:	Driver's signature:	Date:
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