

Fleet Vehicle Inspection Report

Inspector Name

Inspection Date

Vehicle ID / License Plate

Odometer Reading

Inspection Checklist

Item	Pass	Fail	Comments
Brakes	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Tires	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Lights	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Fluid Levels	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Mirrors & Windows	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Horn	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Additional Notes

Inspector Signature