

ANNUAL AUTOMOBILE SAFETY INSPECTION REPORT

Report of Condition

Policy Number	PREPARE SEPARATE REPORT				Inspection Date		
Tolloy Ivaliabol		FOR EACH VEHICLE INSPECTED					
Owner (if not motor carrier)					Phone		
Address							
Inspection Location				Inspector's Name (print)			
YEAR: MAKE:			TYPEVIN:				
LIGHTING	oĸ	NEEDS REPAIR	REPAIR DONE	BRAKES	ок	NEEDS REPAIR	REPAIR DONE
Headlights				Adjustment			
Tail/ Stop				Mech. Components			
Clearance/ Marker				Drum/ Rotor			
Identification				Hose/Tubing			
Reflectors				Lining			
Other				Low Air Warning			
CAB/ BODY				Trailer Air Supply			
Access				Compressor			
Load Securement				Parking Brakes			
Tie Downs				Tractor Protection			
Headerboard				Valve			
Emergency Equip.				Other			
Other				COUPLERS			
STEERING				Fifth Wheel & Mount			
Adjustment				Pin/ Upper Plate			
Column/ Gear				Pintle-Hook/ Eye			
Axle				Safety Chains			
Linkage				Other			
Power Steering				EXHAUST			
Other				Leaks			
FUEL SYSTEM				Placement			
Tank(s)				WINDSHIELD			
Lines				WIPERS			
Other				MIRRORS			
SUSPENSION				List any other condition	which may	prevent saf	e operation
Springs				of this vehicle.	,	•	•
Attachments							
Sliders							
Other		1	 				
FRAME							
Members							
Clearance							
Other							
TIRES							
Tread							
Inflation							
Damage							
Tire & Wheel Clearance							
Other							
WHEELS/RIMS		1					
Fasteners		1	<u> </u>				
Disc/ Spoke		1					
Other							
THIS VEHICLE HAS BEE	EN INSPE	CTED AND R	EPAIRED AS	NEEDED TO COMPLY WITH	49 CFR PA	RT 396, APF	PENDIX G.