Progress Inc. Employee Vehicle Inspection Checklist

Date:/						
Employee: Vehicle Make: Veh		Wor	Work Location:			
		Vehicle Model:				
Employee vehicle inspections turned in to the Coordinator o regular inspections will result	f Employe	e Relatio	ns following			
ITEM TO INSPECT	1	OK	NOT OK	COMMEN	NTS	
1. Tires	*					
2. Seat Belts	*					
3. Brakes	*					
4. Steering and Suspension	*					
5. Lights						
6. Glass Damage						
7. Engine Belt(s)						
8. Heater (winter months)						
9. Air Conditioner (summer mont	ths)					
10. Wiper Blades						
11. Emergency Brake						
12. First Aid Kit						
13. Fire Extinguisher (Optional)						
14. Horn						
15. Oil Level						
16. Power Steering Fluid						
17. Transmission Fluid						
18. Brake Fluid						
19. Windshield Cleaner						
20. System Coolant						
21. Accident Forms						
22. Other:						
23. Current Vehicle Insurance Poli	су			(Verified by Inspector	r)	
*Items 1-4: If "NOT OK" vehicle Items 5-22: If "NOT OK" vehic			•	-	and re-inspected.	
Employee Signature	Date		Ins	Inspector's Signature		
Place of Business	Phone#					
Re-inspection required?	Yes	No	Date of	Re-inspection:		
Employee Signature	Date		Inspector's Signature		Date	
			Pla	ace of Business	Phone#	

Revised: 06/14/11