

1000 MILE INSPECTION REPORT

COMPANY: _____ DATE: _____
 VEHICLE NO.: _____ ODOMETER READING: _____
 INSPECTION NO.: _____ SHOP: _____
 (INDICATE IF 1M; 2M; 3M; or 4M MILE COMPLIANCE)

TYPE	GROUP	ASSEMBLY	CHECK	REMARKS
	1	AXLE FRONT:		
(L)		Axle & Wheel Alignment		
(AOL)		Tie Rod Assembly, etc.		
	2	AXLE REAR:		
(OL)		Differential Housing		
(L)		Radius Rods, etc.		
	3	BODY & CAB		
	4	BRAKES		
	5	CLUTCH		
	6	COOLING SYSTEM		
	7	ELECTRICAL SYSTEM		
	8	ENGINE		
	9	FRAME & SPRINGS		
	10	FUEL & EXHAUST SYSTEM		
	11	STEERING		
	12	TRANSMISSION		
	13	PROPELLER SHAFT		
	14	WHEELS, RIMS, & TIRES		
		SPECIAL EQUIPMENT or ASSEMBLIES:		
	15			
	16			
	17			
	18			

NOTES: (1) Type of Inspection; (A) Adjustments; (H) Heavy Inspection; (L) Light Inspection; (V) Visual Check-up; (O or G) Oil or Grease; (R) Replace or Rebuild; (T) Test; (SR) See Remarks; (Imprinted types are minimum inspection requirements) – enter additional inspection codes as applied).

MECHANIC: _____ SUPERVISOR: _____

(Use reverse side of sheet for additional data as required within operator's maintenance program).

5000 MILE INSPECTION REPORT

COMPANY: _____ DATE: _____
 VEHICLE NO.: _____ ODOMETER READING: _____
 INSPECTION NO.: _____ SHOP: _____
 (INDICATE IF 1; 2; 3; 4; 5; 6; 7; 8; or 9th 5000 MILE COMPLIANCE)

TYPE	GROUP	ASSEMBLY	CHECK	REMARKS
	1	AXLE FRONT:		
(TA)		Axle & Wheel Alignment		
(H)		Axle Center		
(AOL)		Tie Rod Assembly, etc.		
	2	AXLE REAR:		
(OL)		Differential Housing		
(L)		Radius Rods, etc.		
	3	BODY & CAB		
	4	BRAKES:		
(H)		Brake Spider, etc.		
	5	CLUTCH		
	6	COOLING SYSTEM		
	7	ELECTRICAL SYSTEM		
	8	ENGINE		
	9	FRAME & SPRINGS		
	10	FUEL & EXHAUST SYSTEM		
	11	STEERING		
	12	TRANSMISSION		
	13	PROPELLER SHAFT		
	14	WHEELS, RIMS, & TIRES		
		SPECIAL EQUIPMENT or ASSEMBLIES:		
	15			
	16			
	17			
	18			

NOTES: (1) Type of Inspection; (A) Adjustments; (H) Heavy Inspection; (L) Light Inspection; (V) Visual Check-up; (O or G) Oil or Grease; (R) Replace or Rebuild; (T) Test; (SR) See Remarks; (Imprinted types are minimum inspection requirements) – enter additional inspection codes as applied).

MECHANIC: _____ SUPERVISOR: _____

(Use reverse side of sheet for additional data as required within operator's maintenance program).

50,000/100,000 MILE INSPECTION REPORT

COMPANY: _____ DATE: _____
 VEHICLE NO.: _____ ODOMETER READING: _____
 INSPECTION NO.: _____ SHOP: _____
 (INDICATE WHETHER 50,000 or 100,000 MILE COMPLIANCE)

TYPE	GROUP	ASSEMBLY	CHECK	REMARKS
	1	AXLE FRONT:		
(TA)		Axle & Wheel Alignment		
(H)		Axle Center		
(H)		Tie Rod Assembly, etc.		
	2	AXLE REAR:		
(H)		Differential Housing		
(H)		Radius Rods, etc.		
(H)	3	BODY & CAB		
(H)	4	BRAKES:		
(H)		Brake Spider, etc.		
(H)	5	CLUTCH		
(H)	6	COOLING SYSTEM		
(H)	7	ELECTRICAL SYSTEM		
(H)	8	ENGINE		
(H)	9	FRAME & SPRINGS		
(H)	10	FUEL & EXHAUST SYSTEM		
(H)	11	STEERING		
(H)	12	TRANSMISSION		
(H)	13	PROPELLER SHAFT		
(H)	14	WHEELS, RIMS, & TIRES		
(H)		SPECIAL EQUIPMENT or ASSEMBLIES:		
	15			
	16			
	17			
	18			

NOTES: (1) Type of Inspection; (A) Adjustments; (H) Heavy Inspection; (L) Light Inspection; (V) Visual Check-up; (O or G) Oil or Grease; (R) Replace or Rebuild; (T) Test; (SR) See Remarks; (Imprinted types are minimum inspection requirements) – enter additional inspection codes as applied).

MECHANIC: _____ SUPERVISOR: _____

(Use reverse side of sheet for additional data as required within operator's maintenance program).

INSPECTION CHECK LIST

No.	Report	Miles	Date	Inspector	Exceptions or Remarks
1	1,000	1,000			
2	1,000	2,000			
3	1,000	3,000			
4	1,000	4,000			
5	5,000	5,000			
6	1,000	6,000			
7	1,000	7,000			
8	1,000	8,000			
9	1,000	9,000			
10	5,000	10,000			
11	1,000	11,000			
12	1,000	12,000			
13	1,000	13,000			
14	1,000	14,000			
15	5,000	15,000			
16	1,000	16,000			
17	1,000	17,000			
18	1,000	18,000			
19	1,000	19,000			
20	5,000	20,000			
21	1,000	21,000			
22	1,000	22,000			
23	1,000	23,000			
24	1,000	24,000			
25	5,000	25,000			
26	1,000	26,000			
27	1,000	27,000			
28	1,000	28,000			
29	1,000	29,000			
30	5,000	30,000			
31	1,000	31,000			
32	1,000	32,000			
33	1,000	33,000			
34	1,000	34,000			
35	5,000	35,000			
36	1,000	36,000			
37	1,000	37,000			
38	1,000	38,000			
39	1,000	39,000			
40	5,000	40,000			
41	1,000	41,000			
42	1,000	42,000			
43	1,000	43,000			
44	1,000	44,000			
45	5,000	45,000			
46	1,000	46,000			
47	1,000	47,000			
48	1,000	48,000			
49	1,000	49,000			
50	50,000	50,000			
100	100,000	100,000			

(Complete either 50,000 or 100,000 line – whichever applies)

Notes: Checkoff inspections to assure compliance – use righthand column for important exceptions or reminders for control purposes.