

# Pre-trip Vehicle Condition Report

Coach No. \_\_\_\_\_

Date \_\_\_\_\_

Mileage \_\_\_\_\_

**THIS FORM COMPLIES WITH SECTIONS 396.11 and 396.13 OF THE  
FEDERAL MOTOR CARRIER SAFETY REGULATIONS.**

	OK	DEFECT	MECHANIC INITIAL	DATE
		SERVICE BRAKE		
		PARKING BRAKE		
		STEERING		
		REFLECTORS		
		TIRES		
		WHEELS & RIMS		
		HORN		
		WINDSHIELD WIPERS		
		REAR VIEW MIRRORS		
		EMERGENCY EQUIPMENT		
		FIRE EXTINGUISHER		
		FIRST AID KIT		
		OTHER		

**Explanation:**

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If additional space is needed, check here  and use the reverse side.

Driver Making Report \_\_\_\_\_

Mechanic \_\_\_\_\_

Driver Reviewing Report \_\_\_\_\_