

<i>Vehicle Information</i>			
<b>Unit #</b>	0001	<b>VIN#</b>	1FBSS31L080804042
<b>License Plate</b>	CB-6524	<b>Expiration Date</b>	09/2014
<b>Make</b>	Ford	<b>Year Model</b>	2008
<b>Capacity</b>	16 Passenger	<b>Safety Sticker Expiration date</b>	06/2014
<b>Color</b>	Gray	<b>Insurance Card Expiration Date</b>	08/22/2014
<b>Oil Change Date</b>		<b>Last Oil Change Mileage</b>	
<b>Air Filter Date</b>		<b>Last Air Filter Change Mileage</b>	
INSPECTION			
<b>DATE</b>		<b>INSPECTED BY:</b>	
<b>Oil Level</b> <input type="checkbox"/> OKAY <input type="checkbox"/> LOW <input type="checkbox"/> NOT CHECKED	<b>Oil Added</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>Windshield</b> <input type="checkbox"/> OKAY <input type="checkbox"/> POOR	
<b>Fuel Level</b> <input type="checkbox"/> FULL <input type="checkbox"/> 3/4 <input type="checkbox"/> 1/2 <input type="checkbox"/> 1/4 <input type="checkbox"/> 1/8	<b>Mileage</b>		
Tire Tread			
<b>Front Passenger</b> <input type="checkbox"/> OKAY <input type="checkbox"/> POOR		<b>Front Driver</b> <input type="checkbox"/> OKAY <input type="checkbox"/> POOR	
<b>Rear Passenger</b> <input type="checkbox"/> OKAY		<b>Rear Driver</b> <input type="checkbox"/> OKAY <input type="checkbox"/> POOR	
Tire Pressure [ -PSI]			
<b>Tire Pressure</b> <input type="checkbox"/> NOT CHECKED			
<b>Front Passenger</b>		<b>Front Driver</b>	
<b>Rear Passenger</b>		<b>Rear Driver</b>	
<b>Spare</b>			
<b>Floors Clean</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Seats Clean</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Outside Clean</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Floor Mats in Place</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Air Conditioner Working</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Heater Working</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Turn Signals (Blinkers) in Working Condition</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Emergency Flashers in Working Condition</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Brakes in Good Working Condition</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Vehicle Jack and Lug Wrench available</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
<b>Proof of insurance in van and current</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT CHECKED	
COMMENTS (Explain all No's and list any repairs needed)			

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_