



### 5310 Program Daily Vehicle Pre-Trip & Service Productivity Report

VEHICLE:

Ford Escape

VIN #: 1FMCU9GD7HUC04079

FOR THE WEEK OF (XX/XX/XX):

7/22/2019

	MON	TUE	WED	THU	FRI
	7/22/2019	7/23/2019	7/24/2019	7/25/2019	7/26/2019
DRIVER:	Bob			Bob	Bob

VEHICLE WALK AROUND COMPLETED Y or N (Use UDOT Vehicle Pre-Trip Inspection Form)	y			y	y
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VEHICLE FUEL/GALLONS	31360			7.4	
BEGIN ODOMETER	31270			31360	31439
END ODOMETER	31360			31439	31543
TOTAL DAILY MILES	90			79	104
# OF ONE-WAY PASSENGER TRIPS	6			4	7
# OF PASSENGERS SERVICED	6			2	5
DRIVER HOURS	7			7	7
MAINTENANCE (DATE/SCHEDULE)	-			-	-
TRIP PURPOSE <small>Please select one or more categories: Work, Medical, Social, Grocery, Other (please explain)</small>	med			med	med
WAS VEHICLE OUT OF SERVICE? Y or N	N			N	N
COMMENTS:	-			-	-

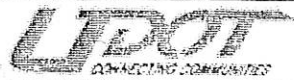
V.I.N. # (Last 4 digits) 4079 **DAILY PRE-TRIP INSPECTION** AM  PM  Mileage 31270

I have personally inspected this vehicle and do hereby certify that all items are safe, repaired or replaced and meet safety standards

Signed Robert Word Date: 7-22-2019

CHECKLIST	PASS	FAIL	PROBLEM / ACTION TAKEN
<b>WALK AROUND INSPECTION: (Set parking brake)</b>			
Observe under vehicle for any leaks or obstructions	✓		
Note any dents, scratches or other damage (tampering)	✓		
Muffler condition and securement	✓		
<b>*Check tire pressures</b>	✓		
<b>*Check tire treads - 2/32" rear - 4/32" front (including spare )</b>	✓		
Wheels – bent, loose or missing lug nuts & mud flaps	✓		
<b>*LIGHTS – head – turn signals – tail - brake – hazard – reverse</b>	✓		
Clearance, marker, boarding, license, interior lights & reflectors	✓		
Doors – driver and entrance	✓		
Adjust mirrors (ability to view rear tires as well as traffic essential)	✓		
<b>OPEN HOOD:</b>			
<b>*Check/fill with correct motor oil</b>	✓		
<b>*Radiator overflow container level</b>	✓		
<b>*Fluids at proper level: <input type="checkbox"/> Brake <input type="checkbox"/> Steering</b>	✓		
<b>*Windshield washer fluid</b>	✓		
Battery housing and connections	✓		
Visible drive belts, wires and hoses	✓		
Windshield – condition and cleanliness	✓		
<b>START ENGINE:</b>			
<b>*Transmission fluid level</b>	✓		
<b>*Gauges working</b>	✓		
<b>*Windshield wipers and blades</b>	✓		
<b>*Horn</b>	✓		
<b>*Defroster</b>	✓		
<input type="checkbox"/> Heater <input type="checkbox"/> Air conditioner	✓		
Steering wheel (no more than 2" of play in a 20" wheel)	✓		
<b>*Emergency brake stops free rolling vehicle</b>	✓		
<b>*Wheelchair lift /cycle &amp; locate bar for manual operation</b>	✓		
<b>*Back up beeper</b>	✓		
<b>*Fire extinguisher – correctly charged, dated &amp; secured</b>	✓		
<b>*First aid kit – proper items &amp; replenished</b>	✓		
<b>*Blood pathogen kit – required items</b>	✓		
<b>*3 reflectors: complete and in red box</b>	✓		
Seats & handrails, condition and secure	✓		
<b>*Seat belts – functioning</b>	✓		
<b>*Seat belt cutter – preferably in reach of driver</b>	✓		
<b>*Exit windows, roof hatch functioning (open min. every 90 days)</b>	✓		
Current insurance I.D.	✓		
Current registration & safety inspection sticker	✓		
Vehicle free of loose objects.	✓		
Overall cleanliness of vehicle	✓		

All bolded / asterisked \* items must pass or vehicle should not be driven – report pre-trip daily to supervisor. Vehicle should be kept in a secure location and locked every day.



DAILY PRE-TRIP INSPECTION

V.I.N. # (Last 4 digits) 4079

AM

PM

Mileage 31360

I have personally inspected this vehicle and do hereby certify that all items are safe, repaired or replaced and meet safety standards

Signed: Robert Warden

Date: 7-25-2019

CHECKLIST	PASS	FAIL	PROBLEM / ACTION TAKEN
<b>WALK AROUND INSPECTION: (Set parking brake)</b>			
Observe under vehicle for any leaks or obstructions	✓		
Note any dents, scratches or other damage (tampering)	✓		
Muffler condition and securement	✓		
<b>*Check tire pressures</b>	✓		
<b>*Check tire treads - 2/32" rear - 4/32" front (including spare )</b>	✓		
Wheels – bent, loose or missing lug nuts & mud flaps	✓		
<b>*LIGHTS – head – turn signals – tail - brake – hazard – reverse</b>	✓		
Clearance, marker, boarding, license, interior lights & reflectors	✓		
Doors – driver and entrance	✓		
Adjust mirrors (ability to view rear tires as well as traffic essential)	✓		
<b>OPEN HOOD:</b>			
<b>*Check/fill with correct motor oil</b>	✓		
<b>*Radiator overflow container level</b>	✓		
<b>*Fluids at proper level: <input type="checkbox"/> Brake <input type="checkbox"/> Steering</b>	✓		
<b>*Windshield washer fluid</b>	✓		
Battery housing and connections	✓		
Visible drive belts, wires and hoses	✓		
Windshield – condition and cleanliness	✓		
<b>START ENGINE:</b>			
<b>*Transmission fluid level</b>	-		
<b>*Gauges working</b>	✓		
<b>*Windshield wipers and blades</b>	✓		
<b>*Horn</b>	✓		
<b>*Defroster</b>	✓		
<input type="checkbox"/> Heater <input type="checkbox"/> Air conditioner	✓		
Steering wheel (no more than 2" of play in a 20" wheel)	✓		
<b>*Emergency brake stops free rolling vehicle</b>	✓		
<b>*Wheelchair lift /cycle &amp; locate bar for manual operation</b>	-		
<b>*Back up beeper</b>	-		
<b>*Fire extinguisher – correctly charged, dated &amp; secured</b>	-		
<b>*First aid kit – proper items &amp; replenished</b>	-		
<b>*Blood pathogen kit – required items</b>	-		
<b>*3 reflectors: complete and in red box</b>	-		
Seats & handrails, condition and secure	-		
<b>*Seat belts – functioning</b>	✓		
<b>*Seat belt cutter – preferably in reach of driver</b>	-		
<b>*Exit windows, roof hatch functioning (open min. every 90 days)</b>	-		
Current insurance I.D.	✓		
Current registration & safety inspection sticker	✓		
Vehicle free of loose objects.	✓		
Overall cleanliness of vehicle	✓		

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V.I.N. # (Last 4 digits) 4029 **DAILY PRE-TRIP INSPECTION** AM  PM Mileage 31439

I have personally inspected this vehicle and do hereby certify that all items are safe, repaired or replaced and meet safety standards

Signed: Robert Worden Date: 7-26-2019

CHECKLIST	PASS	FAIL	PROBLEM / ACTION TAKEN
<b>WALK AROUND INSPECTION: (Set parking brake)</b>			
Observe under vehicle for any leaks or obstructions	<input checked="" type="checkbox"/>		
Note any dents, scratches or other damage (tampering)	<input checked="" type="checkbox"/>		
Muffler condition and securement	<input checked="" type="checkbox"/>		
<b>*Check tire pressures</b>	<input checked="" type="checkbox"/>		
<b>*Check tire treads - 2/32" rear - 4/32" front (including spare )</b>	<input checked="" type="checkbox"/>		
Wheels – bent, loose or missing lug nuts & mud flaps	<input checked="" type="checkbox"/>		
<b>*LIGHTS – head – turn signals – tail - brake – hazard – reverse</b>	<input checked="" type="checkbox"/>		
Clearance, marker, boarding, license, interior lights & reflectors	<input checked="" type="checkbox"/>		
Doors – driver and entrance	<input checked="" type="checkbox"/>		
Adjust mirrors (ability to view rear tires as well as traffic essential)	<input checked="" type="checkbox"/>		
<b>OPEN HOOD:</b>			
<b>*Check/fill with correct motor oil</b>	<input checked="" type="checkbox"/>		
<b>*Radiator overflow container level</b>	<input checked="" type="checkbox"/>		
<b>*Fluids at proper level: <input type="checkbox"/> Brake <input type="checkbox"/> Steering</b>	<input checked="" type="checkbox"/>		
<b>*Windshield washer fluid</b>	<input checked="" type="checkbox"/>		
Battery housing and connections	<input checked="" type="checkbox"/>		
Visible drive belts, wires and hoses	<input checked="" type="checkbox"/>		
Windshield – condition and cleanliness	<input checked="" type="checkbox"/>		
<b>START ENGINE:</b>			
<b>*Transmission fluid level</b>	<input checked="" type="checkbox"/>		
<b>*Gauges working</b>	<input checked="" type="checkbox"/>		
<b>*Windshield wipers and blades</b>	<input checked="" type="checkbox"/>		
<b>*Horn</b>	<input checked="" type="checkbox"/>		
<b>*Defroster</b>	<input checked="" type="checkbox"/>		
<input type="checkbox"/> Heater <input type="checkbox"/> Air conditioner	<input checked="" type="checkbox"/>		
Steering wheel (no more than 2" of play in a 20" wheel)	<input checked="" type="checkbox"/>		
<b>*Emergency brake stops free rolling vehicle</b>	<input checked="" type="checkbox"/>		
<b>*Wheelchair lift /cycle &amp; locate bar for manual operation</b>	<input checked="" type="checkbox"/>		
<b>*Back up beeper</b>	<input checked="" type="checkbox"/>		
<b>*Fire extinguisher – correctly charged, dated &amp; secured</b>	<input checked="" type="checkbox"/>		
<b>*First aid kit – proper items &amp; replenished</b>	<input checked="" type="checkbox"/>		
<b>*Blood pathogen kit – required items</b>	<input checked="" type="checkbox"/>		
<b>*3 reflectors: complete and in red box</b>	<input checked="" type="checkbox"/>		
Seats & handrails, condition and secure	<input checked="" type="checkbox"/>		
<b>*Seat belts – functioning</b>	<input checked="" type="checkbox"/>		
<b>*Seat belt cutter – preferably in reach of driver</b>	<input checked="" type="checkbox"/>		
<b>*Exit windows, roof hatch functioning (open min. every 90 days)</b>	<input checked="" type="checkbox"/>		
Current insurance I.D.	<input checked="" type="checkbox"/>		
Current registration & safety inspection sticker	<input checked="" type="checkbox"/>		
Vehicle free of loose objects.	<input checked="" type="checkbox"/>		
Overall cleanliness of vehicle	<input checked="" type="checkbox"/>		

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