|  |  |  |  |
| --- | --- | --- | --- |
| WEEKLY CHECKS | SATISFACTORY | | COMMENTS |
| ITEM | YES | NO |  |
| BODYWORK |  |  |  |
| FUEL |  |  |  |
| OIL LEVEL |  |  |  |
| WATER |  |  |  |
| BATTERY |  |  |  |
| BRAKE FLUID |  |  |  |
| LIGHTS |  |  |  |
| INDICATORS |  |  |  |
| REFLECTORS |  |  |  |
| WASHER |  |  |  |
| WIPERS |  |  |  |
| WINDSCREEN |  |  |  |
| MIRRORS |  |  |  |
| NUMBER PLATES |  |  |  |
| HORN |  |  |  |
| FOOTBRAKE |  |  |  |
| HANDBRAKE |  |  |  |
| TYRE CONDITION |  |  |  |
| TYRE PRESSURE |  |  |  |
| WHEEL NUTS |  |  |  |
| SAFE LOAD |  |  |  |

ANY OTHER COMMENTS REGARDING THE VEHICLE

……………………………………………………………………………………………………………………………………………………………….

DRIVER’S NAME…………………………………………………………… TIME……………………………………………………………….

VEHICLE REG………………………………………………………………… DATE……………………………………………………………….

CURRENT MILEAGE……………………………………………………..

Remember when moving off to check brakes, steering and clutch.

Ensure that any provided accessories such as fire extinguisher, tow rope, first aid kit, warning triangle or vehicle jack are in order and in place.

