

Commercial Vehicle Inspection Report

Vehicle Information

Company Name:

Vehicle Number:

License Plate:

Make/Model:

Inspection Details

Inspection Date:

Inspector Name:

Odometer Reading:

Check Items

☐ Brakes

☐ Lights

☐ Tires

☐ Mirrors

☐ Horn

☐ Windshield Wipers

☐ Safety Equipment

Comments/Defects

Inspector Signature

Signature:

Submit Report