

**University Vehicle Safety Inspection Form > 10,000 GVW**

Inspection Date: \_\_\_\_\_ Mileage: \_\_\_\_\_ GVWR: \_\_\_\_\_

Vehicle #: \_\_\_\_\_ License #: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_

Garage: \_\_\_\_\_ Location: \_\_\_\_\_

Inspection by ASE technician required - Inspected by: \_\_\_\_\_

ASE Certification #: \_\_\_\_\_

Check all items: **S**-Satisfactory or **U** -Unsatisfactory

**If vehicle needs repair and was not repaired please list under remarks**

<p><b>S U</b></p> <p><input type="checkbox"/> <input type="checkbox"/> Seat &amp; shoulder belts-if OEM</p> <p><input type="checkbox"/> <input type="checkbox"/> Headlights (upper &amp; lower beams)</p> <p><input type="checkbox"/> <input type="checkbox"/> Taillights (stop &amp; turn signals)-if OEM</p> <p><input type="checkbox"/> <input type="checkbox"/> Horn – Electric and/or Air horn must work</p> <p><input type="checkbox"/> <input type="checkbox"/> Windshield</p> <p><input type="checkbox"/> <input type="checkbox"/> Windshield wipers</p> <p><input type="checkbox"/> <input type="checkbox"/> Window operation</p> <p><input type="checkbox"/> <input type="checkbox"/> Door latch operation</p> <p><input type="checkbox"/> <input type="checkbox"/> Parking Brake (Must function and hold truck)</p> <p><input type="checkbox"/> <input type="checkbox"/> Mirrors</p> <p><input type="checkbox"/> <input type="checkbox"/> Floorboard integrity</p> <p><input type="checkbox"/> <input type="checkbox"/> Installed Towing Devices (Security, Integrity, Functionality)</p> <p><input type="checkbox"/> <input type="checkbox"/> Electric Brake Controllers (must work if installed)</p> <p><input type="checkbox"/> <input type="checkbox"/> Air brake system (engine off – air pressure drop LT 5 PSI per minute, engine on – air pressure max LT 125 PSI) (Apply brakes and hold – no continual loss or audible loss of air)</p> <p style="text-align: center;"><u>Tread Depth &amp; PSI -</u></p> <p><input type="checkbox"/> <input type="checkbox"/> Left steer: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Left rear: _____/_____</p>	<p><b>S U</b></p> <p><input type="checkbox"/> <input type="checkbox"/> Suspension</p> <p><input type="checkbox"/> <input type="checkbox"/> Shock absorber/strut condition</p> <p><input type="checkbox"/> <input type="checkbox"/> Springs &amp; spring mountings</p> <p><input type="checkbox"/> <input type="checkbox"/> Driveline; U-joints &amp; CV joints</p> <p><input type="checkbox"/> <input type="checkbox"/> Brake lining (Remove 1 front &amp; 1 rear wheel) Lining Thickness F_____ R_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Brake hose condition</p> <p><input type="checkbox"/> <input type="checkbox"/> Steering</p> <p><input type="checkbox"/> <input type="checkbox"/> Master cylinder leakage (<input type="checkbox"/> NA air brakes)</p> <p><input type="checkbox"/> <input type="checkbox"/> Master cylinder fluid level (<input type="checkbox"/> NA air brakes)</p> <p><input type="checkbox"/> <input type="checkbox"/> Exhaust system</p> <p><input type="checkbox"/> <input type="checkbox"/> Clutch Free Travel (Brake squeeze if equipped)</p> <p><input type="checkbox"/> <input type="checkbox"/> Trailer air hoses and light cords</p> <p><input type="checkbox"/> <input type="checkbox"/> Slack adjuster travel LT 1 ½”)</p> <p style="text-align: center;"><u>Tread Depth &amp; PSI</u></p> <p><input type="checkbox"/> <input type="checkbox"/> Right steer: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p> <p><input type="checkbox"/> <input type="checkbox"/> Right rear: _____/_____</p>
<p><b>Front Outer Dual</b></p> <p><b>Front Inner Dual</b></p> <p><b>Rear Outer Dual</b></p> <p><b>Rear Inner Dual</b></p> <p><b>Tag Outer Dual</b></p> <p><b>Tag Inner Dual</b></p>	
<p><b><u>TREAD DEPTH TO BE 5/32 OF AN INCH OR GREATER ON ALL STEER TIRES – NO RECAPS</u></b></p> <p><b><u>TREAD DEPTH TO BE 3/32 OF AN INCH OR GREATER ON ALL OTHER TIRES</u></b></p>	
<p><b>Seat belts must function if vehicle was originally equipped, or has been retrofitted</b></p> <p><b>All OEM lights must be operational</b></p> <p><b>Windshield, must be crack and obstruction free in front of driver’s field of view</b></p> <p><b>Windshield wipers must operate on driver’s side</b></p> <p><b>Window (drivers side) must operate if vehicle is used on the public highways</b></p> <p><b>Door must operate on driver’s side and all doors must latch</b></p> <p><b>Vehicle must be equipped with left &amp; right outside rear view mirror</b></p> <p><b>All steering components must pass safety inspection</b></p> <p><b>Floorboards must not be rusted or broken allowing openings to the outside</b></p> <p><b>Check brake lining thickness, one front and one rear (remove wheel if necessary)</b></p> <p><b>Brake hoses (no breaks, cracks or leakage)</b></p> <p><b>Master cylinder must hold pressure when brake pedal depressed</b></p> <p><b>Exhaust system must be leak free to eliminate exhaust from leaking into the passenger compartment</b></p> <p><b>Tire(s) shall be considered unsafe if it has any bump, bulge, or known defect affecting the tire structure. A break, cut, evidence of cap separation, or weather checking which exposes a tire body cord is considered unsafe.</b></p>	