

VEHICLE INSPECTION

INSPECTION POINT	PASS	FAIL
1 Foot brakes (pads/shoes thickness)	<input type="checkbox"/>	<input type="checkbox"/>
Min. per manufacturer	_____	
Right foot	Measurements	_____
Left foot	Measurements	_____
Right rear	Measurements	_____
Left rear	Measurements	_____
2 Emergency brake (parking brake)	<input type="checkbox"/>	<input type="checkbox"/>
3 Steering mechanism	<input type="checkbox"/>	<input type="checkbox"/>
Ball joints	<input type="checkbox"/>	<input type="checkbox"/>
Tie rods	<input type="checkbox"/>	<input type="checkbox"/>
Rack & pinion	<input type="checkbox"/>	<input type="checkbox"/>
Bushings	<input type="checkbox"/>	<input type="checkbox"/>
4 Windshield	<input type="checkbox"/>	<input type="checkbox"/>
Large crack (Greater than 1") = Fail		
Small crack (Smaller than 1") = Pass		
5 Rear window and other glass	<input type="checkbox"/>	<input type="checkbox"/>
6 Windshield wipers	<input type="checkbox"/>	<input type="checkbox"/>
7 Headlights	<input type="checkbox"/>	<input type="checkbox"/>
8 Tail lights	<input type="checkbox"/>	<input type="checkbox"/>
9 Turn indicator lights	<input type="checkbox"/>	<input type="checkbox"/>
10 Stop lights	<input type="checkbox"/>	<input type="checkbox"/>
11 Seats (secure, undamaged, front adjusts)	<input type="checkbox"/>	<input type="checkbox"/>
12 Doors (open, close, lock)	<input type="checkbox"/>	<input type="checkbox"/>
13 Horn	<input type="checkbox"/>	<input type="checkbox"/>

INSPECTION POINT	PASS	FAIL
14 Speedometer	<input type="checkbox"/>	<input type="checkbox"/>
15 Bumpers	<input type="checkbox"/>	<input type="checkbox"/>
16 Muffler and exhaust system	<input type="checkbox"/>	<input type="checkbox"/>
17 Tires, incl. tread depth	<input type="checkbox"/>	<input type="checkbox"/>
Right front	[32nd's / in]	_____
Left front	[32nd's / in]	_____
Right rear	[32nd's / in]	_____
Left rear	[32nd's / in]	_____
*Vehicle includes flat tire kit: inflator/sealant kit or tire jack, handle, lug wrench set		
18 Interior and exterior rear view mirrors	<input type="checkbox"/>	<input type="checkbox"/>
19 Safety belts and air bags	<input type="checkbox"/>	<input type="checkbox"/>
20 Wheelchair accessible vehicles (ONLY)	<input type="checkbox"/>	<input type="checkbox"/>
Ramp light deploys		
Shoulder seat belt		
Ramp surface		
Contrast – boarding edge		
Securement devices		

VEHICLE INSPECTION

(Please circle)

PASS

FAIL

DRIVER NAME

DRIVER EMAIL ADDRESS

DRIVER SIGNATURE

DRIVER PHONE NUMBER

DATE

TO BE COMPLETED BY INSPECTOR

LICENSE PLATE #

VIN#

VEHICLE MILEAGE

VEHICLE MAKE

VEHICLE MODEL

VEHICLE YEAR

INSPECTOR COMPANY AND ADDRESS

ASE ID NUMBER

INSPECTOR NAME

INSPECTOR SIGNATURE

DATE

* BY SIGNING ABOVE, INSPECTOR VERIFIES THAT THIS INSPECTION WAS COMPLETED BY A REPAIR SHOP THAT IS CERTIFIED WITH THE CALIFORNIA BUREAU OF AUTOMOTIVE REPAIR
AND BY A TECHNICIAN THAT HOLDS VALID CERTIFICATES OF COMPETENCY ISSUED BY THE NATIONAL INSTITUTE FOR AUTOMOTIVE SERVICE EXCELLENCE

DRIVER INSTRUCTIONS: ALL FIELDS ON THIS FORM MUST BE COMPLETED. EMAIL SCAN OR PHOTOGRAPH OF FORM TO APPLY@SIDE.CR