# METRO LIFT

## VEHICLE DEFECT CARD

**Vehicle No.** ________ **Date** ________

- [ ] Vehicle Pre-Trip Check
- [ ] Accident

Note any damage on the vehicle body. Use seg.# and circle.

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### CHECKLIST

#### INSIDE

- [ ] Parking Brake
- [ ] Start Engine
- [ ] Radio
- [ ] Oil Pressure (light or gauge)
- [ ] Engine Warning Lights
- [ ] Windshield Wipers & Washers
- [ ] Heater - Defroster
- [ ] Mirrors
- [ ] Air Conditioner
- [ ] Horn
- [ ] Interior Lights - Dome and Passenger
- [ ] Check Fast Idle Operation
- [ ] Check Interlock Operation
- [ ] Turn Signal Operation
- [ ] 4 Way Flasher
- [ ] Check Drive Cam Operation
- [ ] Spongy Brake Pedal
- [ ] Check Rear Door Open Light & Buzz
- [ ] Fire Extinguisher & Highway Devices
- [ ] Windows
- [ ] Seats
- [ ] Count Wheelchair Retractors (15)
- [ ] Count Wheelchair Seatbelts (4)
- [ ] Vehicle Cleanliness Int., [ ] Ext.

#### OUTSIDE

- [ ] Check & Cycle Wheelchair Lift
- [ ] Passenger Windows
- [ ] Service Door Glass
- [ ] Tire Condition
- [ ] Wheel Covers
- [ ] Reflectors
- [ ] Headlights / High & Low
- [ ] Turn Signal Lights / Left & Right
- [ ] License Plate
- [ ] Windshield / Check for Cracks
- [ ] Doors (Ent, Lift, Battery, Compressor)
- [ ] Tail Lights
- [ ] Turn Signals Left, Right, Midshift
- [ ] LED STOP Sign
- [ ] Brake Lights
- [ ] 4 Way Flashers
- [ ] Yellow Flashing Caution Lights
- [ ] License Plate / Light

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**Beginning Mileage**

**Ending Mileage**

**Fuel Level (circle)**  F 3/4  1/2  1/4

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**OPERATORS SIGNATURE**

**CONDITIONS**