

# LAZER CONSTRUCTION COMPANY, INC.

## Vehicle / Equipment Inspection Report

Date Inspected: \_\_\_\_\_

Vehicle No.: \_\_\_\_\_

Inspector: \_\_\_\_\_

Mileage: \_\_\_\_\_

ITEM	OK / NA	NEEDED REPAIRS / COMMENTS
Tires		
Shocks		
Steering		
Exhaust System		
Engine/Trans (Check Fluids)		
Mirrors		
Horn		
Windshield		
Windshield Wipers		
Windshield Washers		
Fire Extinguishers		
Flares/Markers		
Signage		
First Aid Kit		
Parking Brake		
Brakes (3-part Air Brake Test)		
Body Damage		
Accident Report Form		
Headlights: High / Low		
Left Turn Signal		
Right Turn Signal		
Brake Lights		
Backup Lights		
Instrument Lights		
Tail Lights		
GE Card/ Insurance/Registration		
Back-up Alarm (if installed)		
Tool Boxes		
Hydraulics		

**X** \_\_\_\_\_  
INSPECTOR

**X** \_\_\_\_\_  
SUPERVISOR