

Vehicle Defect Report

Drivers Name:

Vehicle / Fleet Number:

Date / Time:

Speedo / Odometer Reading:

Daily Check

- | | |
|--|---|
| <input type="checkbox"/> 1. Good visibility for driver through bus windows and mirrors
All required mirrors fitted and adjusted correctly | <input type="checkbox"/> 12. Wheels in good condition and secure. Tyres undamaged with correct inflation and tread depth |
| <input type="checkbox"/> 2. Driving controls, seat and driver safety belt adjusted correctly | <input type="checkbox"/> 13. All lights and reflectors fitted, clean and in good condition |
| <input type="checkbox"/> 3. Windscreen washer, wipers, demister and horn operating correctly | <input type="checkbox"/> 14. Exhaust secure with no excess noise or smoke |
| <input type="checkbox"/> 4. Tachograph calibrated with correct hours, Speed limiter plaque displayed | <input type="checkbox"/> 15. Vehicle body work in good condition, fuel cut off working |
| <input type="checkbox"/> 5. All instruments, gauges and other warning devices operating correctly (including ABS/EBS in-cab warning lights) | <input type="checkbox"/> 16. Vehicle access, steps, handholds and surfaces in good condition |
| <input type="checkbox"/> 6. No air leaks or pressure drop | <input type="checkbox"/> 17. Air suspension correctly set (if fitted) |
| <input type="checkbox"/> 7. Fire extinguisher, first aid kit, emergency hammer (if applicable) in place and serviceable | <input type="checkbox"/> 18. Engine oil, water, windscreen washer reservoir and fuel levels checked and no leaks (including fuel cap) |
| <input type="checkbox"/> 8. Passenger safety belts, seats, handrails, walkways, lighting and luggage racks in good condition | <input type="checkbox"/> 19. Steering and brakes operating correctly |
| <input type="checkbox"/> 9. Emergency exit door and buzzer working correctly
Emergency signs in place | <input type="checkbox"/> 20. Luggage door secure |
| <input type="checkbox"/> 10. Vehicle sitting square and not leaning to one side | <input type="checkbox"/> 21. Tachograph, speedometer and speed limiter operating correctly |
| <input type="checkbox"/> 11. Tax disc, insurance disc, and PSV plate (if applicable) present and valid. Number plate clearly visible | <input type="checkbox"/> 22. ABS/EBS warning lights off |
| | <input type="checkbox"/> 25. NIL DEFECT |

RECORD BELOW ANY ACCIDENT HOWEVER SMALL. VEHICLE DEFECTS OR IRREGULARITIES. HAND PINK DUPLICATE COPY INTO OFFICE / TRAFFIC OFFICER. VEHICLE DEFECTS MUST ALSO BE REPORTED TO THE SENIOR MAINTENANCE & REPAIR ENGINEER WHO WILL INITIAL THE ORIGINAL COPY.

Notes:

Drivers Signature

Reported to

Defect Rectified by

Signature

Date