

CAL FIRE/County Fire Vehicle Driver's Safety Check

Date:Odomete	er:Unit #:
☐ Pre-Trip Inspection	☐ Post-Trip Inspection
Only I tems Che Gauges- Ammeter, Oil Pressure, Fuel, Water Temperatures, Air Pressure or Vacuum Windshield Wipers Windshield & Windows Heater & Defroster Mirrors Brakes (Foot & Parking) Engine Noises Horn & Sirens Steering Vehicle Body Wheels, Tires, Lugs Fuel Tank and Cap Leaks-Water, Fuel, Oil	ecked Require Attention: Head Lights Tail Lights Stop Lights Turn Signals & 4 Way Flasher Reflectors Emergency Equipment Clearance Lights Emergency Warning Lights Side Marker Lights Brake Hoses Compartment Door Locks Drain Air Tanks of Moisture Air Systems Mounted Equipment Other-If Applicable
Remarks: (Explain unsatisfa	actory items noted above)
Signature of Driver: To Be Completed by Repair Shop Mechanic's Report (If def	Date:
Signature of Repair Shop: Foreman or Mechanic	:



CAL FIRE/County Fire Vehicle Driver's Safety Check

Date: .	Odometer: _		Unit #:
☐ Pre	e-Trip Inspection		Post-Trip Inspection
	Only Items Check	ced	Require Attention:
☐ Ga	•		Head Lights
Ami	meter, Oil Pressure, Fuel,		Tail Lights
	ter Temperatures, Air Pressure Vacuum		Stop Lights
	ndshield Wipers		Turn Signals & 4 Way Flasher
□ Wir	ndshield & Windows		Reflectors
☐ Hea	ater & Defroster		Emergency Equipment
□ Mir	rors		Clearance Lights
□ Bra	akes (Foot & Parking)		Emergency Warning Lights
🗕 Eng	gine Noises		Side Marker Lights
☐ Ho	rn & Sirens		Brake Hoses
□ Ste	eering		Compartment Door Locks
☐ Vel	nicle Body		Drain Air Tanks of Moisture
□ Wh	ieels, Tires, Lugs		Air Systems
⊐ Fu∈	el Tank and Cap		Mounted Equipment
☐ Lea	aks-Water, Fuel, Oil		Other-If Applicable
Rema	rks: (Explain unsatisfacto	ry it	rems noted above)
	ture of Driver:		Date:
Mecha	anic's Report (If defects	s ar	e noted)
Signa	ture of Repair Shop:		Date:
	n or Mechanic	(Use back of form for additional remar