

Attention Authorizing Official: Every vehicle used by the enterprise for training students or instructors must be inspected prior to its use for training, and annually. A completed copy of this form must be on file for each vehicle in the school file.

NOTE: NO ALTERATIONS OF ANY KIND MAY BE MADE TO THIS INSPECTION FORM.

- ALL DEFECTS MUST BE CORRECTED
- ENTERPRISE IS REQUIRED TO COMPLETE NAME AND ADDRESS

ENTERPRISE NAME	LICENSE NUMBER	YEAR	MAKE	LICENSE NUMBER
ADDRESS		SERIAL NUMBER		
CITY		COUNTY	STATE Ohio	

CHECK ONLY ITEMS NEEDING ATTENTION OR REPAIR

<input type="checkbox"/> BODY MARKINGS OR ADVERTISING	<input type="checkbox"/> VEHICLE INSURANCE	<input type="checkbox"/> WIPER / WASHER	<input type="checkbox"/> BODY CONDITION
<input type="checkbox"/> DEFROSTERS / FANS / HEATERS	<input type="checkbox"/> SAFETY BELTS	<input type="checkbox"/> STEERING	<input type="checkbox"/> EXHAUST SYSTEM
<input type="checkbox"/> CERTIFICATE OF REGISTRATION	<input type="checkbox"/> DRIVERS SEAT	<input type="checkbox"/> LICENSE PLATES	<input type="checkbox"/> FLOOR <input type="checkbox"/> HORN
<input type="checkbox"/> LIGHTS: <input type="checkbox"/> HEAD <input type="checkbox"/> L <input type="checkbox"/> R	<input type="checkbox"/> MIRRORS:	<input type="checkbox"/> STUDENT	<input type="checkbox"/> INSTRUCTOR
<input type="checkbox"/> REVERSE <input type="checkbox"/> TAIL <input type="checkbox"/> L <input type="checkbox"/> R	<input type="checkbox"/> TIRES: <input type="checkbox"/> LF <input type="checkbox"/> LR <input type="checkbox"/> RF <input type="checkbox"/> RR	<input type="checkbox"/> STUDENT DRIVERS SIGN : <input type="checkbox"/> 3" LETTERS <input type="checkbox"/> REFLECTIVE	
<input type="checkbox"/> TURN SIGNALS <input type="checkbox"/> L <input type="checkbox"/> R	<input type="checkbox"/> GLASS <input type="checkbox"/> WINDSHIELD <input type="checkbox"/> TINTING <input type="checkbox"/> OTHER		
<input type="checkbox"/> LICENSE <input type="checkbox"/> HIGH BEAM INDICATOR	<input type="checkbox"/> BRAKES <input type="checkbox"/> DUAL CONTROL <input type="checkbox"/> EMERGENCY <input type="checkbox"/> FOOT		

All vehicles must comply with all applicable Federal and State Motor Vehicle Safety Standards (Ohio Revised Code (R.C.) Section 4513.02)

REMARKS:

The above listed defects / discrepancies are to be repaired / corrected immediately.

AO OR TM SIGNATURE X	AO OR TIM PRINTED NAME	DATE
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No person shall falsify, alter, or in any manner tamper with any records required to be kept by the Ohio Administrative Code (O.A.C.).

INSPECTION DATE	<input type="checkbox"/> PASSED <input type="checkbox"/> FAILED	RE-INSPECTION DATE	<input type="checkbox"/> PASSED <input type="checkbox"/> FAILED
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CERTIFICATION: In accordance with provisions of R.C. Section 4513 and / or 5577, the above vehicle has been inspected and meets standards prescribed by the Ohio Department of Public Safety under O.A.C. 4501-7.

INSPECTOR NAME	TITLE	DATE
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Contested defects shall be referred to an Ohio certified mechanic or an original equipment manufacturer (OEM) authorized service facility at the vehicle owner's expense with documented results attached to the inspection report.