



VEHICLE INSPECTION REPORT - SCHEDULE 2

www.ReadyChek.com
support@readychek.com

Company/Operator name and address: _____

Vehicle Licence Plate: _____ Prov: _____

Location of Inspection: _____

Odometer at time of inspection: _____

Date: ___/___/___

Time of Inspection: _____ AM / PM

Pre-trip Inspection Post-trip Inspection

Trailer No. 1 Plate: _____ Prov: _____ Trailer No. 2 Plate: _____ Prov: _____

Use an X if item is not satisfactory and indicate defect code(s). Repairer use checkmark when corrected and your initials

Table with 6 columns: Systems and Components, Minor Code(s) (Vehicle, TR 1, TR 2), Major Code(s) (Vehicle, TR 1, TR 2), Systems and Components, Minor Code(s) (Vehicle, TR 1, TR 2), Major Code(s) (Vehicle, TR 1, TR 2). Rows include parts 1-25 such as Accessibility Devices, Air Brake System, Fuel System, etc.

Minor/Major defects not coded above: _____ Remarks: _____

No defects found Above defects need not be repaired for safe operation of vehicle Above defects must be repaired for safe operation of vehicle

I declare that the vehicle(s) shown above has (have) been inspected in accordance with the applicable requirements of NSC Standard 13 Schedule 2 and/or jurisdiction legislation

Inspector's Name: _____

Driver's Name: _____

Inspector's Signature: _____

Driver's Signature (If different from Inspector): _____

Defects En Route: _____ Driver's Signature: _____
Above defects need not be repaired for safe operation of vehicle Above defects must be repaired for safe operation of vehicle
Above defects have been repaired Authorized Repairer's Signature: _____ or Driver's Signature: _____ Date: ___/___/___