



VEHICLE INSPECTION REPORT - SCHEDULE 1

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 12 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: Part 1. Air Brake System, Part 2. Cab, Part 3. Cargo Securement, Part 4. Coupling Devices, Part 5. Dangerous Goods, Part 6. Driver Controls, Part 7. Driver Seat, Part 8. Electric Brake System, Part 9. Emergency Equipment and Safety Devices, Part 10. Exhaust System, Part 11. Frame and Cargo Body, Part 12. Fuel System, Part 13. General, Part 14. Glass and Mirrors, Part 15. Heater / Defroster, Part 16. Horn, Part 17. Hydraulic Brake System, Part 18. Lamps and Reflectors, Part 19. Steering, Part 20. Suspension System, Part 21. Tires, Part 22. Wheels, Hubs and Fasteners, Part 23. Windshield Wiper / Washer.

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 Ontario Regulation 199/07 Schedule 1 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: ___/___/___