

## **VEHICLE INSPECTION FORM** for 5310 Mobility Management Funded Vehicles

azdot gov

**WIPERS** 

SEE PAGE 2 FOR INSTRUCTIONS

42-0102 R02/25 azuot.gov			Ok = Satisfactory NR = Needs Repair				
Agency Name (Vehicle Owner)		Mileage Inspector Initials Inspection Date For Mileage					
Bus No.:			License Plate #:				
Complete Inspection and Check							
PASS T FAIL D			VIN: Manufacturer:				
Inspection Company:							
Inspector Name:			Model:Year:				
Inspector Signature:			Lift / Ramp				
BRAKES	ОК	NR	ENGINE COMPARTMENT	ОК	NR		
ADJUSTMENT			OIL LEVEL				
MECHANICAL COMPONENT			RADIATOR				
DRUM / ROTOR			BATTERIES				
HOSE / TUBING							
LINING			INTERIOR	ОК	NR		
PARKING BRAKES			WINDOWS/OPERATION				
OTHER			MIRRORS				
			FRONT DOOR OPERATION				
FUEL SYSTEM	ОК	NR	PASSENGER SEATS				
TANK(S)			INTERLOCKS				
LINES			GRAB RAILS / STANTIONS				
OTHER			SIDE/FRONT/REAR/CEILING PANELS				
			FLOOR COVERING				
STEERING	ОК	NR	STEPWELL				
ADJUSTMENT			EMERGENCY EXITS				
COLUMN / GEAR			SUN VISOR				
AXLE							
LINKAGE			CAB / BODY	ОК	NR		
POWER STEERING			ACCESS				
OTHER			EQPT / LOAD SECURE				
			TIE-DOWNS				
SUSPENSION	ОК	NR	HEADERBOARD				
SPRINGS			MOTORCOACH SEATS				
ATTACHMENTS			OTHER				
SLIDERS							
OTHER			LIGHTING	ОК	NR		
			HEADLIGHTS				
WHEELS / RIM	ОК	NR	TAIL / STOP				
FASTENERS			CLEARANCE / MARKER				
DISK / SPOKE			IDENTIFICATION				
MIRRORS			REFLECTORS INTERIOR				
WINDSHIELD			OTHER				

EXHAUST	ОК	NR
LEAKS		
PLACEMENT		

TIRES	ОК	NR
TREAD		
INFLATION		
DAMAGE		
OTHER		

TIRE TREAD DEPTH IN 32NDS		
RF		
LF		
RR OUTER		
RR INNER		
LR OUTER		
LR INNER		

OTHER	ОК	NR
WARNING GAUGES		
PANEL LIGHTS		

AC / HEATER	ОК	NR
HEATER		
CAB A/C		
REAR A/C		

FRAME	ОК	NR
MEMBERS		
CLEARANCE		
OTHER		

ACCESSIBILITY FEATURES	ОК	NR
W/C LIFT DOOR OPERATION		
W/C LIFT OPERATION		
W/C SECUREMENTS		
RAMP		

ON-BOARD	ОК	MISSING
FIRE EXTINGUISHER		
WARNING TRIANGLES		
FIRST AID KIT		
BLOOD BORNE PATHOGEN KIT		

INSTRUCTIONS: This is the annual safety inspection form for 5310 Mobility Program ADOT procured vehicles. Inspector MUST: Initial Mileage, Select PASS or FAIL, and sign the form.

This inspection checklist may be accompanied by a standardized form as long as the top section in the solid box is filled out and signed with the pass or fail indicated.

If the vehicle fails, signature is required for a follow-up inspection.

## OK – Satisfactory

**COMMENTS:** 

NR – Needs Repair

EMAIL completed vehicle inspection sheet to: transitgroup@azdot.gov

## **VEHICLE FAILURE REASONS:**

**Brakes** 

Safety Equipment

Heating Ventilation & Air Conditioning (HVAC) System

Any TIRES Worn Below 4/32NDS of an inch

## WHEELCHAIR LIFT REQUIREMENTS:

- 1. Vehicle Movement is Prevented Unless the Lift Door is Closed.
- 2. Lift Operation Shall Be Prevented Unless the Vehicle is Stopped & Vehicle Movement is Prevented.
- 3. The Platform will Not Fold/Stow if Occupied.
- 4. The Inner Roll Stop will Not Raise if Occupied.
- 5. The Outer Barrier will Not Raise if Occupied.
- 6. Verity Platform Lighting When Lift is Deployed & Pendant Illumination When Lift is Powered.
- 7. Warning Activates if the Threshold Area is Occupied When the Platform is at Least 1 Inch Below Floor Level.
- 8. Platform Movement is Prohibited Beyond the Position Where the Inner Roll Stop is Fully Deployed (UP)