

# VEHICLE CONDITION CHECKLIST

Completed by ……………………………………………………………………………………………………………

Date ………………………………………… Time …………………………………

Vehicle Reg No ………………………………………… Plate No …………………………………

Driver Badge No ………………………………………… Mileage …………………………………

|  |  |  |  |
| --- | --- | --- | --- |
| Area | Requirement | Faulty | Correct |
| Windscreen, Windows and Mirrors | Mirrors are fitted and properly aligned and secure  All windows are clean and not obscured/damaged All windows operational |  |  |
| Washers and Wipers | Wipers move when switched on  Wiper blade must clear the windscreen Washers are operational  Washer fluid is topped up |  |  |
| Lights | All lights and indicators work correctly  All senses are present, clean and in good condition and are the correct colour  Stop lamps come on when then service brake is applied and goes out when released |  |  |
| Seats and Seatbelts | All seats are secure  All seatbelts must operate correctly and must be free from damage |  |  |
| Brakes | Foot/service brake works correctly Hand/parking brake works correctly |  |  |
| Bodywork and Doors | All doors must shut securely and stay open when required  No sharp edges or excess corrosion No loose bodywork |  |  |
| Tyes and Wheels | Minimum tread depth of 1.6mm Correctly inflated  No visible damage |  |  |
| Licence Plates and other identifiers | All plates and mandatory signs displayed, clean and secure  Roof Light is safe and operational (if fitted) Taxi Meter (if fitted) seal is intact and correct  Fare Tariff (if required) displayed |  |  |
| Notes | | | |

I confirm that the vehicle has been visually inspected. If no faults have been identified and reported, I confirm the vehicle is found to be satisfactory at the time of check. If any faults have been identified and reported within this form, I confirm the faults will be rectified prior to the vehicle conducting any licensed work.

Signed……………………………………………………………………………..