



## OF0037 – Weekly Vehicle Check

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AMENDMENT RECORD				ISSUE #: 1		
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Rev. #	Date	Details		Description of Changes	Prepared By	Approved by
		Section #	Para. #			
1						
2						
3						
4						



## WEEKLY VEHICLE CHECK

Date Submitted:

Document Number:

### 1. Vehicle Information

Asset ID:

Registration Number:

Odometer:

### 2. Pre-Start Check

Item	Check
Do you have a spare Tyre or 2 if heading remote? <i>If no note action in comments.</i>	
Do you have your tyre Changing gear? <i>If no note action in comments.</i>	
Have you checked the condition of the tyres? <i>Note any damage in comments</i>	
Have you checked your oil and coolant (Ensure vehicle is cold)? <i>If low or need to add note actions in comments.</i>	
Do you have a full tank of fuel in vehicle and equipment? <i>If low or need to add note actions in comments.</i>	
Have You Checked your vehicle consumables check list to ensure you have correct equipment and consumables? <i>If low or need to add note actions in comments.</i>	
<i>Have you washed the external of your vehicle?</i> <i>Note any Damage in comments</i>	
Have you vacuumed the internal of your vehicle and ensured is rubbish free? <i>Note any Damage in comments</i>	
Is there any Damage to vehicle? <i>Note any Damage in comments</i>	

**Comments:**

### 3. Driver Sign Off

Driver Name:

Driver signature:

### 4. Supervisor Sign Off

Supervisor Name:

Supervisor Signature: