



**VSC Fire and Security Monthly Vehicle Checklist**

License Plate Number: \_\_\_\_\_ Name: \_\_\_\_\_ Model: \_\_\_\_\_

Driver: \_\_\_\_\_ District: \_\_\_\_\_ Division: \_\_\_\_\_

Check Each Item	Yes	No	N/A	Corrective Action to each "No" item
License Plate Current				
Registration in Glove Box/Current				
Safety Binder/Copy on IPAD (Safety Plan and SDS sheets)				
Reporting Forms Packet in Glove Box (Auto, Drug Screen, Evidence Chain of Custody, and Workers Injury Tree)				
Current Insurance Card				
First Aid Kit/Fire Extinguisher				
Ladders in good condition with labels (cracks/wear/steps/working order)				
Manufacturer Manual in Glovebox				
Sanitizer/ Wipes				
Face shields				
Lights, Horn, and Seatbelts Properly Functioning				
Serviced Within 120 days				
General Condition of Truck Good (Cleanliness, Tires, Etc.)				
Maintenance Card (Wheels Information}				
Fuel Card to Match Vehicle				
GFCI/Cords/Harness (If used confirm equipment is in working order (Wear, Cracks, Rips, Tears, and Overall Condition).				

Comments/Other Concerns:

Foreman Signature: \_\_\_\_\_ Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_