

Bus # _____ Route # _____ Driver _____ Date _____
 Mileage _____ Time _____ am ____ pm ____ Items OK Items Need Repair

Is there body damage? am ___ yes ___ no / pm ___ yes ___ no. Damage report completed? ___

ENGINE COMPARTMENT

am	pm	
_____	_____	Leaks (oil/water)
_____	_____	Belts (condition/tension)
_____	_____	Hoses (condition/leaks)
_____	_____	Washer fluid

EMERGENCY EQUIPMENT

am	pm	
_____	_____	Fuses / fire ext / triangles
_____	_____	First aid kit

INTERIOR

am	pm	
_____	_____	Oil pressure (20 sec)
_____	_____	Voltmeter (13.5 – 14.2)
_____	_____	Fuel gauge (no less ½)
_____	_____	Park brake test
_____	_____	Low air warning
_____	_____	Emergency brake test
_____	_____	Horn
_____	_____	Heaters / defrosters / fans
_____	_____	Interior lights
_____	_____	Monitor board
_____	_____	Windshield washer / wipers
_____	_____	Check & adjust mirrors
_____	_____	Wheelchair locks
_____	_____	Emergency windows
_____	_____	Seats (condition)
_____	_____	Emergency door

EXTERIOR CHECK

am	pm	
_____	_____	Strobe light
_____	_____	Right front wheel / lug / tires
_____	_____	Right mirrors

FRONT OF BUS

am	pm	
_____	_____	Hazard lights
_____	_____	School warning flashers
_____	_____	Clearance lights
_____	_____	Turn signals
_____	_____	Headlight (low / high beams)
_____	_____	Windshields
_____	_____	Convex mirrors
_____	_____	Under bus (leaks)

LEFT SIDE

am	pm	
_____	_____	Left front wheel / lug / tires
_____	_____	Left mirrors
_____	_____	Stop arm
_____	_____	Battery box (closed)
_____	_____	Clearance lights
_____	_____	Reflectors
_____	_____	Windows (broken)
_____	_____	Rear wheel / lug / tires
_____	_____	Rear axle seal

REAR OF BUS

am	pm	
_____	_____	Clearance lights
_____	_____	School warning flashers
_____	_____	Hazard lights
_____	_____	Turn signals
_____	_____	Brake lights
_____	_____	Tail lights
_____	_____	Rear glass (clean)
_____	_____	Emergency door
_____	_____	Tailpipe

RIGHT SIDE

am	pm	
_____	_____	Rear wheel / lug / tires
_____	_____	Rear axle seal
_____	_____	Clearance lights
_____	_____	Reflectors
_____	_____	Windows (broken)
_____	_____	Lift door (operation)
_____	_____	Lift (operation)
_____	_____	Fuel cap on

List all items in need of repair on work order.

TURN INTO OFFICE AT END OF DAY

Signature

White – Office

Yellow - Driver