|    | ITEMS TO BE CHECKED<br>(Circle items applicable to your vehicle type only)                              |   | OPEF<br>(For us  | RATOR'S II<br>se with all Reg |  |
|----|---|---|------------------|-------------------------------|--|
| 1  | CLEANLINESS/DAMAGE/MISSING ITEMS (Interior/Exterior) UNUSUAL NOISE OR OCCURRENCE (During operation)     |   | VEHICLE TYPE     |                               |  |
|    | LEAKS/FLUID LEVELS (Visually check for any leaks/check oil/coolant/hydraulic/transimission/brake fluid) |   | V LINO           |                               |  |
| 0  | SAFETY DEVICES (Wiring/lights/horn/warning devices/sirens/reflectors/mirrors/seat belts)                |   | DICTO            |                               |  |
| 4  | BATTERIES (Fluid/damage/cleanliness/security)   |   | DISTRI           | CT NAME                       |  |
| 5  | DRIVE BELTS (Fraying/ cracking/ tension) PULLY / MOTOR (Air / hydraulic / electrical)                   |   |                  |                               |  |
| 6  | STEERING/ SPRINGS (Free play/ excessive wear)   |   | VEHICLE ASSIGNED |                               |  |
| 7  | INSTRUMENTS/GAUGES (Operation & readings)   |   |                  |                               |  |
| 8  | EXHAUST SYSTEM (Damage/ leaks)  |   |                  | OPER                          |  |
| 9  | TIRES/ WHEELS (Lug nuts/ cracks/tire pressure)  |   |                  | OI EI                         |  |
| 0  | HEATER/ DEFROSTER/ AIR-CONDITIONER  |   | DAY              | SHIFT/SIGN                    |  |
|    | BRAKES (Servicing-Parking)/ CLUTCHES (Operate)/ ACCELERATOR PEDAL (Damage/worn)                         |   |                  |                               |  |
|    | WINDSHIELD (Wipers/ washer fluid/ cracks)   |   | 1                |                               |  |
|    | HYDRAULIC HOSES (Damage/ frayed)/ CYLINDERS/ VALVES (Damage/leaks)                                      |   |                  |                               |  |
| 4  | MARKINGS-CHECK LEGIBILITY ("This vehicle is being used to transport school children")                   |   |                  |                               |  |
| 5  | SEAT BELTS (Each seating position has one and all are operational)                                      |   | 2                |                               |  |
| 6  |   |   |                  |                               |  |
| 7  |   |   | 3                |                               |  |
| 8  |   |   | Ŭ                |                               |  |
| 9  |   |   |                  |                               |  |
| 20 |   |   | 4                |                               |  |
| 21 |   |   |                  |                               |  |
| 2  |   | • |                  |                               |  |
| 23 |   |   | 5                |                               |  |
| 4  |   |   |                  |                               |  |
| 5  |   |   | 6                |                               |  |
| 26 |   |   | Ŭ                |                               |  |
| 27 |   |   |                  |                               |  |
| 28 |   |   | 7                |                               |  |
| 29 |   |   | 1                |                               |  |
| 30 |   |   |                  |                               |  |
| 31 |   |   | 8                |                               |  |
| 32 |   |   |                  |                               |  |
| 52 |   |   |                  |                               |  |
| 33 |   |   | 9                |                               |  |
| 34 |   |   |                  |                               |  |
| 35 |   |   |                  |                               |  |
| 36 |   |   | 10               |                               |  |
| 37 |   |   |                  |                               |  |
| 38 |   |   |                  |                               |  |
| 39 |   |   |                  |                               |  |
| 40 |   |   |                  |                               |  |

|                                       |                 | <b>CTION GU</b><br>Vehicle Equip<br>Equipme | IIDE AND TROUBL<br>oment except Refueling V<br>nt) | E REPO    | d MONTH/YEAR    |  |  |
|---------------------------------------|-----------------|---|--|-----------|-----------------|--|--|
| VEHIC                                 | LE TYPE         | VIN NO.                                     |  |           |                 |  |  |
| DISTRICT NAME                         |                 |   |  | PHONE NO. |                 |  |  |
| VEHICLE ASSIGNED TO: (NAME OF PERSON) |                 |   |  |           | PHONE NO.       |  |  |
|                                       | OPERATOR'       |   | RE SIGNIFIES ACCOMPL                               |           | OF CHECKS       |  |  |
| DAY                                   | SHIFT/SIGNATURE | DAY   | SHIFT/SIGNATURE                                    | DAY       | SHIFT/SIGNATURE |  |  |
| 1                                     |                 | 11  |  | 21        |                 |  |  |
| 2                                     |                 | 12  |  | 22        |                 |  |  |
| 3                                     |                 | 13  |  | 23        |                 |  |  |
| 4                                     |                 | 14  |  | 24        |                 |  |  |
| 5                                     |                 | 15  |  | 25        |                 |  |  |
| 6                                     |                 | 16  |  | 26        |                 |  |  |
| 7                                     |                 | 17  |  | 27        |                 |  |  |
| 8                                     |                 | 18  |  | 28        |                 |  |  |
| 9                                     |                 | 19  |  | 29        |                 |  |  |
| 10                                    |                 | 20  |  | 30        |                 |  |  |
|                                       | 1               | <b>I</b>                                    | 1  | 31        |                 |  |  |

Page 1 of 2 Pages

| OPERATOR'S MONTHLY REQUIREMENT                  |                 |          |               |  |                              |                            |                |                        |                |      |
|---|-----------------|----------|---------------|--|------------------------------|----------------------------|----------------|------------------------|----------------|------|
| BEGINNING OF MONTH OPERATING MILES/HOURS        |                 |          |               | TIRE PRESSURE CHECK (Check manufacturer's manual or vehicle for applicable pressure) |                              |                            |                |                        |                |      |
| MILES:  |                 | DATE:    |               |  |                              | FRONT: LBS                 | REAR           |                        | LBS            |      |
| OPERATOR'S NAME and SIGNATURE (print legibly) D |                 | DATE:    |               | OPERATOR'S NAME and SIGNATURE (print legil   |                              | gibly)                     |                | DATE:                  |                |      |
|   |                 | VEHIC    | LE / EQUI     | PMENT DIS  | CREPANCY A                   | I<br>ND MAINTENANCE REPORT |                |                        |                |      |
| OPERATOR REPORT                                 |                 |          |               | RE   | PORTED TO MAINTENANCE MAINT  |                            |                | ITENANCE REPORT STATUS |                |      |
| ITEM<br>NO.                                     | DISCREPA        | NCY      | DATE<br>DISC. | DATE/<br>TIME  | MILES/<br>HOURS              | NAME<br>(print legibly)    | WORK<br>ORDER# | DATE                   | STATUS<br>CODE | INT. |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
|   |                 |          |               |  |                              |                            |                |                        |                |      |
| STATUS C + CORRECTED C-T by Temp Fix            |                 | D + DELA | YED (         | D-P for Parts D-D for Disposition  |                              | Repair                     | I              | 1                      |                |      |
| CODE  | C-P by Perm Fix |          | DTDELATED     |  | D-M for Maint. N = No Repair |                            |                |                        |                |      |