

# CAB INSPECTION REPORT

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

VIN#: \_\_\_\_\_ D.O.T. Inspection Date: \_\_\_/\_\_\_/\_\_\_

Description	Diagnosis
Arm Rest	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Door Seals	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Permit Holder on Left Door	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Floor Mats	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Dash Cracked	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Lower Panels Cracked and in Place	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Shifter Boot	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Gauges Working and Marked	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Switches Working and Marked	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Extra Holes in Dash Plugged	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Headliner Cracked	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Sun Visor	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Seat Pedestal Paint Condition	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Seat Cushions	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Seat Operation	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Radio and Speakers with Covers	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Seat Belts	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Console Cracked or Torn Console Cover	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
All Knobs in Place	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Dome Lights and Covers	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Ash Tray	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Windows kept Clean Inside & Out	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Door Mirrors and Hood Mirror	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Heater Vents	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Accelerator Pedal Rubber	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Clutch Pedal Rubber/Clutch Free Pedal	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Window Vent Latches	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Back-up Alarm	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Low Air Pressure Buzzer	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Door and Window Operation	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Side Box Seals	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Side Box Latches	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
No Flammable Products in Cab or Side Box	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
No Brooms, Wire Brushes, Etc. in Drivers Area	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Areas Needing Painted in the Cab	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Needs to be Cleaned and Armor All	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Cab A/C Filter	<input type="checkbox"/> O.K <input type="checkbox"/> Replace <input type="checkbox"/> Repair <input type="checkbox"/> Other _____
Other:	