

AUBURN UNIVERSITY
Transportation Services
Vehicle Safety Inspection Form

State Tag #: _____

Vehicle Serial Number: _____

Property Control Number: _____

Department: _____

Make _____

Model _____

Year _____

	CHECKED	APPROVED	COMMENTS
Windows			
Wipers & Washer Equipment			
Rearview Mirrors			
Lights			
Turn Signals			
Brake Signals			
Brakes			
Horn			
Heater/Defroster			
Seat Belts			
Tires and Lug Nuts			
Steering			
Front Suspension Components			
Shock Absorbers			
Exhaust System			
Insurance Information Card			

If deficiencies are not corrected at Facilities Division Auto Shop, vehicle must be returned on or before
(Date) _____, for reinspection of items not previously approved.

Signed _____
Inspector Date

Received _____
Customer Date

Charge Account _____