

Test Ride and Pickup Inspection

Locate and inspect condition of each item below. Initial when finished.

- _____ Inspect Tires
- _____ Inspect Brakes
- _____ Inspect Head Light
- _____ Inspect Turn Signals
- _____ Inspect Brake Light
- _____ Inspect Horn
- _____ Inspect and Adjust Mirrors

Locate and review features of all controls listed below. Initial when finished reviewing.

- _____ On/Off
- _____ Horn
- _____ Turn Signals
- _____ Front Brake Lever
- _____ Rear Brake Pedal
- _____ Engine Gauges
- _____ Cruise Control (if applicable)
- _____ Stereo System (if applicable)

Eye and head protection waiver.

- _____ Eye Protection Worn (if not, customer initials)
- _____ Head Protection Worn (if not, customer initials)

Operator Signature: _____ Date: _____

Passenger Signature: _____ Date: _____

Safety and health are the responsibilities of your company. Please understand that the information and services provided do not guarantee that your premises and/or operations are completely free of all hazards, or in compliance with OSHA or any other municipal, state, or federal ordinances or regulations. The information and services received are not a substitute for ongoing safety/loss prevention programs designed and implemented by your company.

