

Vehicle Safety Checklist

| Vehicle: | | | | Plate #: | | |
|--------------------------------|----------------------------|-----------------|----|--------------------------------|--------|--------------------|
| Required Tire Pressure: | | | | | | |
| | | | | | | |
| Date | Area of Vehicle | Safe to Travel? | | Repair Required? (specific) | Notes: | Initials of Driver |
| | | Yes | No | | | |
| | Tire Inflation Pressure: | | | | | |
| | Lights | | | | | |
| | Windshield Wipers | | | | | |
| | Emergency Flashers | | | | | |
| | Horn | | | | | |
| | Brakes | | | | | |
| | Mirrors | | | | | |
| | Fluid Levels | | | | | |
| Date | Area of Vehicle | Safe to Travel? | | Repair Required? (specific) | Notes: | Initials of Driver |
| | | Yes | No | | | |
| | Tire Inflation Pressure: | | | | | |
| | Lights | | | | | |
| | Windshield Wipers | | | | | |
| | Emergency Flashers | | | | | |
| | Horn | | | | | |
| | Brakes | | | | | |
| | Mirrors | | | | | |
| | Fluid Levels | | | | | |
| Date | Area of Vehicle | Safe to Travel? | | Repair Required? (specific) | Notes: | Initials of Driver |
| | | Yes | No | | | |
| | Tire Inflation Pressure: | | | | | |
| | Lights | | | | | |
| | Windshield Wipers | | | | | |
| | Emergency Flashers | | | | | |
| | Horn | | | | | |
| | Brakes | | | | | |
| | Mirrors | | | | | |
| | Fluid Levels | | | | | |
| Date | Area of Vehicle | Safe to Travel? | | Repair Required? (specific) | Notes: | Initials of Driver |
| | | Yes | No | | | |
| | Tire Inflation Pressure: | | | | | |
| | Lights | | | | | |
| | Windshield Wipers | | | | | |
| | Emergency Flashers | | | | | |
| | Horn | | | | | |
| | Brakes | | | | | |
| | Mirrors | | | | | |
| | Fluid Levels | | | | | |

Signature of Driver: _____ Printed Name of Driver: _____
 (Sign at the conclusion of the trip and send a copy of each form to customer care@gssc-mm.org to be attached to the troop travel documents. Use additional sheets if needed)