

GOVERNMENT VEHICLE CHECKLIST

VEHICLE REGISTRATION NUMBER:	VEHICLE LOCATION:
VEHICLE MAKE / MODEL:	AUTHORITY NO:
PRE-INSPECTION	POST-INSPECTION
DATE:	DATE:
TIME:	TIME:
FUEL: F ³ / ₄ 1/ ₂ 1/ ₄ E	FUEL: F ³ / ₄ ¹ / ₂ ¹ / ₄ E
FUEL TANK CAPACITY:	FUEL TANK CAPACITY:
KILOMETERS START:	KILOMETERS END:
Starting Point:	End Point:
REASON:	TOTAL KILOMETERS USED
	REASON:
NAME OF DRIVER:	
SECTION/DIRECTORATE:	NAME OF DRIVER:
CONTACT NUMBER:	SECTION/DIRECTORATE:
VEHICLE & PETROL CARD ISSUED TO:	CONTACT NUMBER:
ISSUED BY:	VEHICLE & PETROL CARD RETURNED BY:
RECEIVED BY:	RETURNED BY:
SIGNATURE:	SIGNATURE:

PRE-INSPECTION

TYRE PRESSURE: FL FR

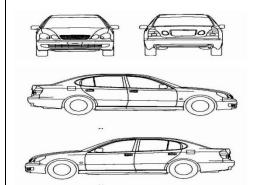
FL FR

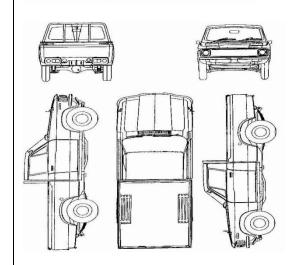
BODY DENT ECT: YES/NO

OIL: HIGH OR LOW JACK: YES/NO

SPAREWHEEL: YES/NO WHEEL SPANNER: YES/NO

TRIANGLE: YES/NO VALID DISK: YES/NO





POST - INSPECTION

TYRE PRESSURE: FL FR

FL FR

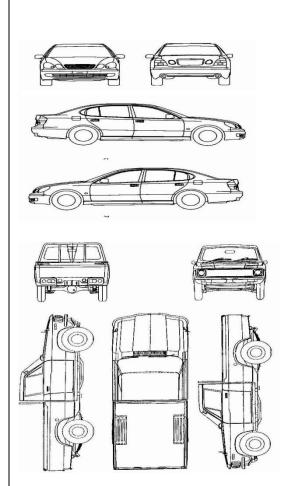
BODY DENT ECT: YES/NO

OIL: HIGH OR LOW JACK: YES/NO

SPAREWHEEL: YES/NO

WHEEL SPANNER: YES/NO TRIANGLE: YES/NO

VALID DISK: YES/NO



VEHICLE INSPECTION AND ISSUE: IS THE VEHICLE ROADWORTHY: YES/NO

SIGNATURE OF DRIVER PRIOR TRIP:	SIGNATURE OF DRIVER AFTER TRIP:
SIGNATURE OF TRANSPORT OFFICER	SIGNATURE OF TRANSPORT OFFICER
BEFORE:	AFTER TRIP: