

Inspector:				
Date:			Time:	
Vehicle Type:				
VIN:			License Plate:	
Exterior	Okay	Repair	N/A	Comments
Check brake lights				
Check hazard flashing lights				
Check headlights				
Check turn signal lights				
Inspect windshield for cracks				
Check wiper blades and washer operation				
Check mirrors				
Check body of vehicle for damage				
Check tires for pressure or damage				
Ensure equipment and materials in truck bed is secure				
Check for fluid leaks under the vehicle				
Tailgate/liftgate functioning properly				
Clean exterior?				
Interior	Okay	Repair	N/A	Comments
Check horn operation				
Check seatbelt				
Check defrosting operation on windshield and rear shield				
Check fuel levels				
Check Fire extinguisher, emergency kits, first aid kits				
Check radios				
Clean interior?				
Additional Notes to the Mechanic:				
Inspector Signature:			Date:	

The insurance policies, not this descriptive brochure, form the contract between the insured and the insurance company. The policies contain limits, exclusions, terms, and conditions not listed in this brochure. Not all coverages are available in all states. All coverages are subject to individual underwriting judgments and to state legal and regulatory requirements. This brochure is provided for informational purposes only and does not constitute legal advice. Policies for this program are issued by one or more insurance companies partnered with Paragon Insurance Holdings, LLC.

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Inspector:				
Date:			Time:	
Vehicle Type:				
VIN:			License Plate:	
Mechanical	Okay	Repair	N/A	Comments
Check windshield fluid level				
Check belts for wear				
Check oil level				
Check coolant level				
Check power steering fluid				
Inspect hydraulic units				
Check brake fluid level				
Check brake hoses, drums, chambers				
Check suspension coils for cracks				
Check air brakes				
Check condition of radiator fan				
Check axle seals for cracks				
Check exhaust system				
Check dumpbed operation				
Check plow controls/operation				
Additional Notes to the Mechanic:				
Inspector Signature:			Date:	

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