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| Each driver should check that the vehicle is fit for service before embarking on their journey. Tick to indicate that each item has been checked & record any defects **before** leaving the site. If any defects are identified the <insert job title> must be informed before embarking on your journey. All drivers must then record any defects found throughout the day. This form must be returned to <insert job title> upon your return to the site. | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **Operating depot** |  | | **Minibus registration number** |  | | **Date** |  | |  | | |
| |  |  | | --- | --- | | **Driver Name** | **Duty (start/end time)** | | 1. |  | | 2. |  | | 3. |  | |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **First driver to check this list** | | | |
| Fuel/oil/water level/leak |  | Horn & reverse horn |  |
| Air leak |  | First aid kit |  |
| Tyres & fixing |  | Alarms |  |
| Brakes |  | Body exterior damage/glass |  |
| Doors & emergency exit operation |  | Mirrors |  |
| Demister/heating/ventilation |  | Steering |  |
| Emergency engine stop |  | Lights/reflectors/indicators |  |
| Wipers & washers |  | Wheelchair ramp |  |
| Fire extinguisher/emergency hammer |  | Body interior/seating/cab |  |

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| --- |
| **Running Details (additional information):** |
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**Drivers Signature – PTO and complete**

All drivers must record all defects – write **NIL** if none found

|  |  |  |
| --- | --- | --- |
| **Driver #** | **Defect** | **Driver Signature** |
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**Work approved by <insert job title>**

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| --- |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |

**Disclaimer**

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