



AmTrust North America
An AmTrust Financial Company

Safety Zone

Vehicle Condition Basic Checklist

Vehicle Information:

Year, Make, Model, License Number _____
Mileage _____

Type of Evaluation: ____ Pre-Trip ____ Post-Trip ____ Supervisory

Are fresh leaks, puddles on the ground?	Y	N
Oil level acceptable?	Y	N
Coolant, power steering fluids in operating range?	Y	N
Safety belts fasten and are in satisfactory condition?	Y	N
Tires have adequate tread remaining?	Y	N
Window glass has no cracks?	Y	N
Exterior and interior mirrors are in place?	Y	N
Turn signals work?	Y	N
Windshield wipers and washer work?	Y	N
Front, rear, license and brake lights work?	Y	N
Horn works?	Y	N
Exhaust system is quiet?	Y	N
Steering works?	Y	N
Brakes work?	Y	N
Driver Accident Site Report form in vehicle?	Y	N
Other: _____	Y	N
_____	Y	N

Damage noted: _____

Maintenance Needed: _____

By: _____
Title: _____ Date: _____

For additional information and resources on this topic and other safety and risk management subjects be sure to visit the Loss Control section on our website:

<https://www.amtrustgroup.com/small-business-insurance/claims/prevention>

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