



VEHICLE SERVICE REPORT

REQUIRED EVERY 7,500 TO 10,000 KM

CF-S-36

Date: _____ Unit: _____ Make/Model: _____

Type: _____ CVIP Expiry Date: _____ Picker Expiry Date: _____

Current ODO/Hours: _____ NSD ODO/Hours: _____

Rating Legend: NA – Not Applicable M – Maintenance Required (passed) R – Rejected, Repair Before Use C – Complete, Passed

Vehicle - Fluid Levels							
Change Engine Oil and Filter		Radiator/Coolant		Diff Fluid Checked		Trans 5000KM Service Completed	Water Separator Drained
Brake Fluid		Windshield Washer		Fuel Tank Inspected for Water Contamination		Transfer Case Checked	Fuel Filter Changed
Power Steering Fluid		Transmission Fluid Checked					

Vehicle - Driver Compartment							
Seatbelts		Windshield Wipers		Instrument Lamps		Radio Functioning	Vehicle Registration/ Insurance
Mirrors		Steering Components		Heater/ Air Conditioning		GPS Unit Functioning	Emergency Contact List
Windshield/ Windows		Driver Controls & Horn		Cab Clean		CVIP Inspection Current	Safety Kit

Vehicle - Body Exterior							
Head Lights		Clearance Lights		Reflectors		Slip Tank. Fuel Filter Inspected	Fenders/Mud Flaps
Signals/Brake/ Hazard Lights		Work Lights		Back-up Alarm		Bumpers	Trailer Plug Brake/ Controller
Marker Lights		Company Branding/ Nektar Tag / Unit #		Mirrors		Body & Doors	Deck

Vehicle - Under The Hood							
Air Compressor		Fuel Pump & System		Air Filter		Cooling System	Exhaust System
Battery		All Belts		Engine Fan		POS Functioning	Controls Greased

Brakes/Tires/Wheels (Hydraulic and Air)							
Brake lines & Hoses		Proportioning Valve		Chock Blocks		Spare Tire	Reservoirs/Valves
Brake Lining		Brakes Camshaft and Travel		Air Loss Rate/Air Comp Check		Tire Wear & Pressure	Parking Brake
Brake Operation		Low Air Indicator		Wheel Bearings		Wheels Torqued to Specs & Lug Indicators	Shocks/Springs Inspected

Crane/Picker if applicable							
Pin Bushing Wear		Hook & Safety Latch		Controls Functioning		Grease Components	Hydraulic Fluid
Crane Operation Tested		Hyd Cylinders Inspected		Outrigger Pads/ Functioning		Mounting Bolts Inspected	Hoses Inspected

Vehicle - Vehicle Documents and Safety Supplies							
Current CVIP/ Sticker		Registration		Insurance		Safety Fitness Certificate	Fire Extinguisher

☐ Passed ☐ Failed

Comments: _____

Inspector's Name: (Please Print) _____

Inspector's Signature: _____ Date: _____

Supervisor's Name: (Please Print) _____

Supervisor's Signature: _____ Date: _____