SEBASTOPOL UNION SCHOOL DISTRICT
VEHICLE INSPECTION FORM

REGISTERED OWNER'S NAME: _____

REGISTRATION CURRENT: [ ] Yes [ ] No

VEHICLE: _____ _____ _____
Make Model Year

SEAT BELTS (# PASSENGERS ONLY): _____

TIRES:	Legal Tread	[ ] Yes	[ ] No
	Even Wear	[ ] Yes	[ ] No
	Legal Tread Spare	[ ] Yes	[ ] No
	Jack	[ ] Yes	[ ] No
BRAKES:	Pass Inspection	[ ] Yes	[ ] No

THE FOLLOWING WERE CHECKED AND ARE IN WORKING ORDER:
[ ] Headlights
[ ] Taillights
[ ] Blinkers
[ ] Wipers
[ ] Mirrors

THE FOLLOWING FLUID LEVELS WERE CHECKED:
[ ] Brake
[ ] Steering
[ ] Oil
[ ] Radiator
Other: _____
_____
_____

CAR TEST DRIVEN (INSPECTOR'S OPTION)? [ ] Yes [ ] No

NOTES:

INSPECTED BY: _____ DATE: _____