

LIGHT VEHICLE CHECKLIST

Driver's Name:			
Company:			
Make:		Model:	
State Authority Registration Sticker No.		Expiry Date:	



SAMPLE

ORDER NOW AND GET FULL ACCESS

Not Applicable	<input type="checkbox"/>	<input type="checkbox"/>
There is a flat tire on the vehicle. The contents are suitable for the load and are within the weight limits.	<input type="checkbox"/>	<input type="checkbox"/>
Working Warning light	<input type="checkbox"/>	<input type="checkbox"/>
There is a working working light that is the vehicle and is operational.	<input type="checkbox"/>	<input type="checkbox"/>
Reverse Alarm	<input type="checkbox"/>	<input type="checkbox"/>
There is a working alarm that and the alarm is operational.	<input type="checkbox"/>	<input type="checkbox"/>
Comments or Additional Requirements for the light vehicle?		
NOTE: The vehicle assessed on this form is not to be driven on the public roads of applicable States or modified in any way.		
Authorisation not valid		

Name:		Signature:		Date:	
-------	--	------------	--	-------	--