

# DVIR Form

Date: \_\_\_\_\_

Driver Name: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Odometer: \_\_\_\_\_

## Inspection Items (Check One)

✓ = OK    ✘ = Defect    N/A = Not Applicable

Item	✓ / ✘ / N/A	Notes
Service brakes	_____	_____ -
Parking brake	_____	_____ -
Steering	_____	_____ -
Lights/reflectors	_____	_____ -
Tires	_____	_____ -
Horn	_____	_____ -
Wipers	_____	_____ -
Mirrors	_____	_____ -
Coupling devices	_____	_____ -

Wheels/rims \_\_\_\_\_  
\_\_\_\_\_

Emergency  
equipment \_\_\_\_\_  
\_\_\_\_\_

**Defects Found:**

**Driver Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **8. Mechanic Repair Certification (If Defects Found)**

**Repairs Completed:**

**Mechanic Name:** \_\_\_\_\_

**Mechanic Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **9. Driver Review After Repair**

I certify that the above repairs have been completed and the vehicle is safe to operate.

**Driver Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_