

## RECORD OF ANNUAL NON-EMERGENCY VEHICLE INSPECTION (2 PAGES)

**Note to Applicant: Detach this Form from the application. Do not submit this form with your application for the Non-Emergency certificate.** Inspect each vehicle registered under your Non-Emergency Certificate & prepare a separate report for each vehicle. Keep the form(s) on file at your place of business. This form must be available for ORS Inspectors to review at any time.

Date \_\_\_\_\_

Carrier Name \_\_\_\_\_

Address \_\_\_\_\_  
Street
City
State
Zip

Vehicle Type \_\_\_\_\_ Model \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_

Vehicle ID Number \_\_\_\_\_ Tag Number/State \_\_\_\_\_

Inspection Location \_\_\_\_\_  
Street
City
State
Zip

Inspector`s Name \_\_\_\_\_

### REPORT OF CONDITION

	OK	REPAIR
<b>BRAKES</b>		
Adjustment		
Drum/Rotor		
Hose/Tubing		
Lining		
Parking Brakes		
Master Cylinder		
<b>EXHAUST</b>		
Leaks		
<b>LIGHTING</b>		
Headlights		
Tail/Stop		
Clearance/Marker		
Reflectors		
Signals		
Interior/Dash		
<b>CAB/BODY</b>		
Access		
Eqpt./Load Secure		
Seat Belts		
Wheelchair Tiedowns		
Straps, Latches, Etc.		
Wheelchair Lifts		
Radios/Cell Phone		
Placard Requirements		
Shoulder Harness (for wheelchair or stretcher positions)		

<b>SUSPENSION</b>			
Springs/Shocks			
		<b>OK</b>	<b>REPAIR</b>
<b>STEERING</b>			
Adjustment			
Column/Gear/Power Steering			
Linkage			
<b>FUEL SYSTEM</b>			
Tanks			
Lines			
<b>FRAME</b>			
Members			
Clearance			
<b>TIRES</b>			
Tread			
Inflation			
Damage			
<b>WHEELS/RIMS</b>			
Fasteners			
<b>WINDSHIELD</b>			
Wipers, Fluid			
<b>GLAZING</b>			
<b>HORN</b>			
<b>MIRRORS</b>			
Interior/Exterior			
		<b>OK</b>	<b>DEFICIENT</b>
<b>FIRST AID KIT AND SAFETY EQUIPMENT</b>			
<u>Item</u>	<u>Amount</u>		
Adult CPR Face Cover	1		
Scissors	1		
Isolation Kits (Gowns, Gloves, and Facemask)	2		
Latex Gloves			
4x4 Pads	12		
Roller Gauze	2		
3 inch Cling Rolls	2		
Triangular Bandages	2		
Adhesive Tape	2		
Spill Kit	1		
Blanket	1		
Band Aids (Various Sizes)			
Bed Pan	1		
Flashlights	2		

\_\_\_\_\_  
Inspector`s Signature

\_\_\_\_\_  
Date