

**MECHANIC’S PUPIL TRANSPORTATION VEHICLE INSPECTION REPORT**

This report is included as an *example* and details minimum inspection points. Schools/contractors may include additional inspection points to this report. This form is to be kept in your school records and made available upon request. **This Checklist Indicates Compliance with Rule 92 Inspection Criteria.**

District/System:			County District #:	
Vehicle Year:	Make of Chassis:	Make of Body:	Capacity:	VIN No:

	First Quarter Date:		Second Quarter Date:		Third Quarter Date:		Fourth Quarter Date:	
	Approved Yes	Approved No	Approved Yes	Approved No	Approved Yes	Approved No	Approved Yes	Approved No
Brakes								
Steering	Yes	No	Yes	No	Yes	No	Yes	No
Suspension Components	Yes	No	Yes	No	Yes	No	Yes	No
Bus Chassis/Frame	Yes	No	Yes	No	Yes	No	Yes	No
Exhaust System	Yes	No	Yes	No	Yes	No	Yes	No
Drive Shaft/Differential	Yes	No	Yes	No	Yes	No	Yes	No
Engine & Fuel System	Yes	No	Yes	No	Yes	No	Yes	No
Tires/Wheels/Hubs	Yes	No	Yes	No	Yes	No	Yes	No
Electrical System	Yes	No	Yes	No	Yes	No	Yes	No
Windshield Wipers	Yes	No	Yes	No	Yes	No	Yes	No
Bus Interior, Floor, & Seats (buses only)	Yes	No	Yes	No	Yes	No	Yes	No
Doors, Steps, & Handrail	Yes	No	Yes	No	Yes	No	Yes	No
Emergency Door/Hatches (buses only)	Yes	No	Yes	No	Yes	No	Yes	No
Windows	Yes	No	Yes	No	Yes	No	Yes	No
Heaters, Defrosters	Yes	No	Yes	No	Yes	No	Yes	No
Mirrors and Bus Exterior	Yes	No	Yes	No	Yes	No	Yes	No
Lights, Lamps, Signals	Yes	No	Yes	No	Yes	No	Yes	No
Stop Signal Arm (buses only)	Yes	No	Yes	No	Yes	No	Yes	No
Emergency Equipment:								
Fire Extinguisher	Yes	No	Yes	No	Yes	No	Yes	No
First Aid/Body Fluid Kit	Yes	No	Yes	No	Yes	No	Yes	No
Emergency Reflection	Yes	No	Yes	No	Yes	No	Yes	No
Wheel Chair Lift Equipment (If equipped)	Yes	No	Yes	No	Yes	No	Yes	No

**MECHANIC'S PUPIL TRANSPORTATION VEHICLE INSPECTION REPORT**

**First Quarter**   Approved   Not Approved

**DESCRIPTION OF ITEMS NOT APPROVED:**

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This pupil transportation vehicle was inspected by: (Signed) \_\_\_\_\_ Date: \_\_\_\_\_  
School Appointed Mechanic

Date non-compliant items were corrected: \_\_\_\_\_  
(Signed) \_\_\_\_\_  
School Appointed Mechanic

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**Second Quarter**   Approved   Not Approved

**DESCRIPTION OF ITEMS NOT APPROVED:**

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This pupil transportation vehicle was inspected by: (Signed) \_\_\_\_\_ Date: \_\_\_\_\_  
School Appointed Mechanic

Date non-compliant items were corrected: \_\_\_\_\_  
(Signed) \_\_\_\_\_  
School Appointed Mechanic

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**Third Quarter**   Approved   Not Approved

**DESCRIPTION OF ITEMS NOT APPROVED:**

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This pupil transportation vehicle was inspected by: (Signed) \_\_\_\_\_ Date: \_\_\_\_\_  
School Appointed Mechanic

Date non-compliant items were corrected: \_\_\_\_\_  
(Signed) \_\_\_\_\_  
School Appointed Mechanic

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**Fourth Quarter**   Approved   Not Approved

**DESCRIPTION OF ITEMS NOT APPROVED:**

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This pupil transportation vehicle was inspected by: (Signed) \_\_\_\_\_ Date: \_\_\_\_\_  
School Appointed Mechanic

Date non-compliant items were corrected: \_\_\_\_\_  
(Signed) \_\_\_\_\_  
School Appointed Mechanic