

DATE

11-29-22

## RECORD OF ANNUAL INSPECTION

(49 CFR, 396. 17-23)

Prepare Separate Report for Each Vehicle Inspected

D7156708

COMPANY NAME THREE AMIGOS			VEHICLE TYPE <input type="checkbox"/> TRUCK <input type="checkbox"/> TRACTOR <input checked="" type="checkbox"/> TRAILER <input type="checkbox"/> CONVERTER <input type="checkbox"/> DOLLY		
STREET ADDRESS 28523 SHAWA PL			VEHICLE MAKE ELIMINATOR		MODEL VAN
CITY SAUGUS			STATE CA		YEAR 2015
ZIP 91350			VEHICLE IDENTIFICATION (Company No., State Tag No. or VIN) WR2 CA 4NY4158		
INSPECTOR'S NAME (Please Print) DAN UNG				EMPLOYEE NO. 001	

## REPORT OF CONDITION (For Detailed Information on Inspection Procedures see FMCSR Section 396, Appendix G)

	OK	REPAIR		OK	REPAIR		OK	REPAIR		OK	REPAIR
<b>BRAKES</b>			<b>EXHAUST</b>			<b>STEERING</b>			<b>FRAME</b>		
Adjustment	/		Leaks	/		Adjustment			Members	/	
Mechan. Compon.	/		Placement	/		Column/Gear			Clearance	/	
Drum/Rotor	/		<b>LIGHTING</b>			Axle	/		<b>TIRES</b>		
Hose/Tubing			Headlights			Linkage	/		Tread	/	
Lining	/		Tail/Stop	/		Power Steering			Inflation	/	
Antilock System			Clearance/Marker	/		Other			Damage	/	
Automatic Adjusters	/		Identification	/		<b>FUEL SYSTEM</b>			Speed Restrictions	/	
Low Air Warning			Reflectors	/		Tank(s)	/		Other		
Trailer Air Supply			Other			Lines	/				
Compressor			<b>CAB/BODY</b>			<b>SUSPENSION</b>			<b>WHEELS/RIM</b>		
Parking Brakes			Access	/		Springs	/		Fasteners	/	
Other			Eqpt./Load Secure	/		Attachments	/		Disc/Spoke	/	
<b>COUPLERS</b>			Tie-Downs	/		Sliders	/		<b>WINDSHIELD</b>		
Fifth-Wheel & Mount			Headerboard	/		<b>MIRRORS</b>			<b>WINDSHLD. WIP.</b>		
Pin/Upper Plate			Motorcoach Seats								
Pintle-Hook/Eye	/		Other								
Safety Chain(s)	/										

## REMARKS

Certification: This vehicle has passed all the inspection items for the annual vehicle inspection in accordance with 49 CFR Part 396.

QUALIFIED INSPECTOR'S SIGNATURE



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