

DATE

1-13-24

RECORD OF ANNUAL INSPECTION

(49 CFR 396.17-23)

D10052552

Prepare Separate Report for Each Vehicle Inspected

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 SHANAPL			VEHICLE MAKE GRTDANE		MODEL VAN
CITY SAUGUS			STATE CA		YEAR 2010
ZIP 91350			VEHICLE IDENTIFICATION (Company No., State Tag No. or VIN) 531 CA 4LE7048		
INSPECTOR'S NAME (Please Print) DAN LINGER				EMPLOYEE NO. 001	

REPORT OF CONDITION (For Detailed Information on Inspection Procedures see FMCSR Part 396, Appendix A)

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

DATE

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