

BIT PROGRAM TRUCK/TRACTOR/TRAILER INSPECTION AND MAINTENANCE RECORD

NEXT INSPECTION 10-14-25

COMPANY THREE AMIGOS

45 DAY
 90 DAY

DATE 7-14-25 REPORT NO. 8546A

LESSOR/CONTRACTOR _____

UNIT NO. 532

LICENSE NO. 45G4180

VEHICLE MAKE TRMBX MODEL VAN YEAR 01

SERIAL NO. 1PT01JA4416005935

ODOMETER READING _____

Indicate completion of the report: Item is ok or not applicable (✓); work is completed, done (✓); type of work completed notes: (A) Adjust, (O or G) Oil or Grease, (R) Replace or Rebuild, (T) Test, (SR) See Remarks. *Inspection of these items required by 34505.5 VC

OK	DONE	NOTES	TRUCK AND/OR TRACTOR	OK	DONE	NOTES	ITEM	TRAILER(S)
			INTERIOR AND EXTERIOR				38. Lights-stop, tail, turn-reflectors	
			1. Fire extinguisher and reflectors-secured-marked	/			39. Air leaks-brake system *	
			2. Horn-defrosters, gauges and speedometer	NA			40. Air leaks-dump system	
			3. Mirrors and supports	/			41. Cracks in body and sub frame	
			4. Windshield wipers-window cracks, condition	/			42. Brakes-adjustment-drums-near cam over *	
			5. Check all lights-turn signals-reflectors, mud flaps	/			43. Springs-U bolts-torque arm *	
			6. Check electrical wiring-condition and protection	NA			44. Drawbar-hitch and safety cable-check strand wear *	
			7. Check batteries-water terminals and cable	/			45. Fifth wheel on pull trailer *	
			8. Warning devices-air, oil and temperature, vacuum *	/			46. Tires, wheel-nuts and studs *	
			ENGINE AND ELECTRIC	/			47. Fifth wheel on pin wear-safety lock *	
			9. Radiator and water hoses-condition-leaks	/			48. Emergency relay valves, tank mounting *	
			10. Belts-compressor(s), fan and water pump *	NA			49. Tarps	
			11. Air lines-leaks, condition and protection *	/			50. Electrical connections-lead wire	
			12. Fuel tanks-lines-pump, condition and protection	/			51. Air lines-between trailers, gladhands, rubbers *	
			13. Manifold and flange gaskets-muffler and condition	/			52. Mud flaps, fenders	
			14. Engine mounts, oil and fuel leaks				ADDITIONAL ITEMS	
			15. Clutch adjustment and free play					
			16. Throttle and linkage, air filter					
			17. Generator/alternator, starter, brushes and wiring					
			BRAKES				PRODUCTS / PARTS USED	
			18. Tractor protection valve-breakaway test *				Item No. LUBRICANTS Amt. Cost	
			19. Brakes-lining, drums, and adjustment-near cam over, pedal ht.-hyd. *				Crankcase Oil _____ \$ _____	
			20. Hoses and tubing condition-protection, hyd., brake reservoir level *				Trans. Lube _____ \$ _____	
			21. Air leaks and 1-minute brake application test, vacuum loss *				Gear Lube _____ \$ _____	
			22. Air governor adjustment-minimum 85-maximum 130 *				Chassis Lube _____ \$ _____	
			23. Identify number 1 air tank-drain-test check valve *				FLUIDS	
			24. All tanks secure, drains operable, drain tanks *				Antifreeze _____ \$ _____	
			25. Check tires, wheels, nuts and studs, cracked, secure and inflation, tread *				Brake Fluid _____ \$ _____	
			26. Parking brake-condition and adjustment *				Hydraulic Fluid _____ \$ _____	
			27. Emergency stopping system-labeled, operable *				FILTERS	
			28. Release after loss of service air-test anti skid lamp *				Oil Filter _____ \$ _____	
			CHASSIS				Air Filter _____ \$ _____	
			29. Check steering gear and mounting-free lash *				Fuel Filter _____ \$ _____	
			30. Steering arms, drag links and tie rod ends *					
			31. Fifth wheel condition and mounting *				PARTS & ACCESSORIES	
			32. Springs, shackles and U-bolts-torque arms *				Description Qty. Cost	
			33. Check frame, cross members, cracks, etc.				_____ \$ _____	
			34. Drive shaft and universal joints				_____ \$ _____	
			35. Transmission, differential-mounting and seals				_____ \$ _____	
			36. Wheel seals leaks, hydraulic brake system leaks *				_____ \$ _____	
			37. Clean under carriage				_____ \$ _____	
			ADDITIONAL ITEMS					
			Ungers Mobile Fleet Service					
			32681 Wagon Wheel Rd.					
			Agua Dulce, CA 91390					
			661-618-6123					
							TOTAL COST SUMMARY	
							Labor Cost Time _____ \$ _____ hr. \$ _____	
							Lubricants & Fluids Cost \$ _____	
							Filters Cost \$ _____	
							Parts & Accessories Cost \$ _____	
							TOTAL COST \$ _____	

REMARKS (use reverse side if required) _____

Work Completed by: _____ Date 7-14-25
 Inspected by: _____ Date _____
 Total Time _____ Hours, _____ Minutes