

2022



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MULTI-POINT INSPECTION

VEH#: 13-117 Mileage: 49352 Year/Make/Model: _____

WO#: 15604 VIN: _____ License: _____ email: _____

■ CHECKED AND OK ■ FUTURE ATTENTION ■ IMMEDIATE ATTENTION

INTERIOR/EXTERIOR			
NOTE ANY EXISTING BODY DAMAGE			
Lights (Head, Brake, Turn, Parking)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windshield / Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wipers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horn / Interior Lights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TIRES			
TREAD DEPTH			
■ 7/32" or greater	■ 3/32" to 6/32"	■ 2/32" or less	
LF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8/32"	RF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8/32"		
LR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8/32"	RR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 8/32"		
	Wear Pattern / Damage	Air Pressure	Based on Mileage and Wear:
	LF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> (!)	<input type="checkbox"/> Alignment
	RF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	BEFORE SHOULD BE	<input type="checkbox"/> Balance
	LR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	LF <input type="checkbox"/> 40	<input type="checkbox"/> Rotation
	RR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	RF <input type="checkbox"/>	<input type="checkbox"/> New Tire
		LR <input type="checkbox"/> 40	
		RR <input type="checkbox"/>	

BATTERY	
■ ■ ■	

BRAKES			
BRAKE PADS / SHOES			
■ Over 5 mm (Disk) or 2 mm (Drum)	■ 3-5 mm (Disk) or 1.01-2 mm (Drum)	■ Less than 3 mm (Disk) or 1 mm (Drum)	
LF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	RF <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
LR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	RR <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

UNDERHOOD			
Oil Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transmission Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power Steering / Brake Fluid	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coolant / Antifreeze	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Filter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabin Filter	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Belts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

UNDER VEHICLE			
Brake Lines / Brake Hoses / Brake Cables / Fuel Lines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Suspension & Steering	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driveline (Axles / CV Shaft)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rear Differential Fluid Level & Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhaust System / Shocks & Struts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS

Inspected by: G. Kinn Anderson Date: 8-25-22