



STANDARD OPERATING GUIDELINE

SUBJECT: Vehicle Condition & Reports **ISSUE DATE:** February 2002 **NO.:** SOG 32

ISSUED BY: D. McCarthy **APPROVED BY:** *[Signature]* **SUPERSEDES DATE:** **PAGE:** 1 OF 3

General: The purpose of this guideline is to insure that Public Works vehicles and equipment are functioning safely and correctly and if not are reported for repair in a timely manner.

Intent: It is the intent of this guideline to provide a quick and simple format for reporting equipment operational status.

Implementation: Prior to the operation of any piece of town equipment or vehicle a "**Vehicle Condition Report**" shall be completed. Upon final usage of any piece of town vehicles or equipment for that workday the same vehicle condition report shall be completed.

Copies of the condition report shall be turned in at the end of the work day as described on the bottom of the form as follows:

White - Highway Foreman
Pink - Operator / Driver
Yellow - Maintenance Foreman

Vehicle condition checks should take no more than fifteen minutes to conduct and shall be completed within one half hour of starting or stopping the vehicle and/or equipment.

All equipment and vehicle operators shall check the service due sticker located on the upper left corner of all equipment and vehicle windshields and compare same with the hour meter or odometer.

When due for service, it shall be the operators responsibility to report it immediately to the Maintenance Foreman.

The vehicle condition report shall be completed in a format consistent with that offered on the following sample.



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D/M

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**Raymond Public Works
Vehicle Condition Report**

Date 3/5/01 Driver MCCARTHY Vehicle # PWD-1

	Time	Mileage	Hourmeter
Start	8:00 ^{a.m.} _{p.m.}	968 mi.	N/A hrs.
Finish	5:00 ^{a.m.} _{p.m.}	988 mi.	N/A hrs.

Out Bound Checks	In Bound Checks	Amount	Fluid	Out Bound Checks	In Bound Checks	Amount	Fluid
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	15.1	Fuel (gals.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Coolant (gals.)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1	Eng. Oil (qts.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Auto Trans. (qts.)
<input type="checkbox"/>	<input type="checkbox"/>		Hyd. Oil (gals.)	<input type="checkbox"/>	<input type="checkbox"/>		Other

NO DEFECTS - Condition of Vehicle is Satisfactory

If items need repair, check below and describe.		Repairs Completed	Further Work Scheduled
<input type="checkbox"/>	Body Metal/Damage		
<input type="checkbox"/>	Brakes		
<input type="checkbox"/>	Cab - Items & Controls		
<input type="checkbox"/>	Clutch		
<input type="checkbox"/>	Electric System		
<input type="checkbox"/>	Engine & Fuel		
<input checked="" type="checkbox"/>	Exhaust & Cool - <u>LOW EXHAUST</u>	<u>03/06</u>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	Decals & Registration		
<input type="checkbox"/>	Gauges - Radio		
<input type="checkbox"/>	Hyd. System - Cycle		
<input type="checkbox"/>	Lights - Reflectors		
<input type="checkbox"/>	Safety Equipment		
<input type="checkbox"/>	Safety Systems		
<input type="checkbox"/>	Steering		
<input type="checkbox"/>	Susp. - Axles, Springs		
<input type="checkbox"/>	Tires, Rims, Lugs		
<input type="checkbox"/>	Trans. - Driveline		
<input type="checkbox"/>	Winch, Cable, Chains		
<input checked="" type="checkbox"/>	Other <u>P.M. DUE</u>	<u>03/07</u>	
Explanation:			

Driver Initials DGM Driver Initials DGM

Driver Signature D.C. 25 Date 03/05/01

Maint. Sign Off [Signature] Date 03/07/01

Driver Review [Signature] Date 03/10/01



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1. That days date consisting of month, date and year.
 2. Driver or operator's last name or highway number
 3. Vehicle or equipment number
 4. Approximate start time and finish time and circle A.M. or P.M.
 5. Start and finish mileage, if equipped.
 6. Start and finish hours if equipped with hour meter
 7. Start and finish tank levels and amount added
 8. Start and finished oil level and amount if added
 9. Start and finished hydraulic oil level and amount if added
 10. Start and finished coolant and amount if added
 11. Start and finished automatic transmission fluids and amounts if added
 12. Check ONLY items requiring repairs with explanation
 13. Outbound check if vehicle or equipment is satisfactory to use
 14. Inbound check if vehicle or equipment is satisfactory for use after completion of daily usage.
 15. For use of foreman only
 16. Drivers initials after each check cycle
 17. Driver signature and date
 18. Maintenance sign off after repairs
 19. Driver sign off after review of repairs