



UNIT# 81302

**ANNUAL REPORT OF VEHICLE INSPECTION**

As prescribed in 49CFR 396.17 through 396.23 and Appendix G to subchapter B

49CFR 396.21

"(b)(1) The original or a copy of the inspection report shall also be retained by the motor carrier under whose control the vehicle operates for 30 consecutive days or more, for a period of 1 year. The inspection report shall be retained where the vehicle is either housed or maintained.

(b)(2) The original or a copy of the inspection report shall be maintained on the vehicle and available for inspection upon demand of an authorized Federal, State or local official."

Description of Vehicle: Make Wabash Year 2013 Model van  
Vehicle Identification No. 1JTV532D9BL825389  
Type: Tractor \_\_\_\_\_ Trailer \_\_\_\_\_ Semi-Trailer \_\_\_\_\_  
License plate No. \_\_\_\_\_ State \_\_\_\_\_  
Owner's Name \_\_\_\_\_  
Name of Authorized Carrier \_\_\_\_\_

Indicate in the proper column the result of the inspection of each item listed:

ITEM	NOT DEFECTIVE		DESCRIPTION OF DEFECT
	DEFECTIVE	DEFECTIVE	
Brake System		✓	<u>5 Camg Bad</u>
Coupling Devices	✓		
Exhaust System	<u>NA</u>		
Fuel System	<u>NA</u>		
Lighting Devices	✓		
Safe Loading	<u>NA</u>		
Steering Mechanism	<u>NA</u>		
Suspension	✓		
Frame	✓		
Tires	✓		
Wheels and Rims	✓		
Windshield Glazing	<u>NA</u>		
Windshield Wipers	<u>NA</u>		

Any other items requiring attention: \_\_\_\_\_

I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_, I carefully inspected the driver's log and equipment described above and that this is a true and correct report of the result of such inspection.

Kerla Shuc (Name of person making inspection) (type or print) [Signature] (Signature of person making inspection)

I hereby certify that on the date stated above the person who made the inspection covered by this report was competent and qualified to make such inspection and was duly authorized to make such inspection as a representative of \_\_\_\_\_

\_\_\_\_\_  
(Name of authorized carrier)

Date 11-8-22 \_\_\_\_\_  
(Signature of authorized carrier or examiner)