

ANNUAL VEHICLE INSPECTION REPORT

Wick's Truck Trailers, Inc.
 10580 South 147th Street
 Omaha, NE 68138

Report of Vehicle Inspection
 As Required by 396.3
 49 CFR

CUSTOMER Wicks Truck TRAILER

DATE 11 18 25

TRAPE UNIT NO. SERIAL NO. YEAR MAKE LICENSE NO. STATE

TRACTOR					
TRAILER	678098	7678098	26	WIS	WI
ST. TRUCK					
CONV. DOLLY					

W.O. REF. NO. 305992
 HUB MILEAGE _____

TRAILER (or straight truck van body)	NOT DEFECTIVE	DEFECTIVE	RIGHT FRONT	RIGHT REAR	LEFT FRONT	LEFT REAR
Brakes: Show % of Lining Left TO OF P.	<input checked="" type="checkbox"/>					
Stemco - Mechanex - Grease (circle one)	<input checked="" type="checkbox"/>					
On Stemco or Mechanex Inspect Lining by Removing Dust Shields - Add Oil if Needed	<input checked="" type="checkbox"/>					
Equalizer	<input checked="" type="checkbox"/>					
Brake Lines: Glad Hands to Relay Valves to Chambers	<input checked="" type="checkbox"/>					
Radius Rods	<input checked="" type="checkbox"/>					
Tighten U-bolts (Wheels Off) if Required	<input checked="" type="checkbox"/>					
Brake Pans, Drums For Wear and Looseness	<input checked="" type="checkbox"/>					
Wheels and Axles	<input checked="" type="checkbox"/>					
Fluid Flaps:	<input checked="" type="checkbox"/>					
Tire Air Pressure:	<input checked="" type="checkbox"/>					
Lights, Reflectors: Operation-Damaged-Missing	<input checked="" type="checkbox"/>					
Dollies: Free Operation-Worn Broken Parts	<input checked="" type="checkbox"/>					
Suspension: <input checked="" type="checkbox"/> Air <input type="checkbox"/> Spring <input type="checkbox"/> Other	<input checked="" type="checkbox"/>					
Worn Hangers	<input checked="" type="checkbox"/>					
Spring Hangers Bolts and/or Rivets	<input checked="" type="checkbox"/>					
Frame: Subframe, Crossmembers & Kingpin	<input checked="" type="checkbox"/>					
Rear End Protection Device	<input checked="" type="checkbox"/>					
Body: <input type="checkbox"/> Loaded <input checked="" type="checkbox"/> Empty	<input checked="" type="checkbox"/>					
All Panels for Holes, Floor	<input checked="" type="checkbox"/>					
Doors and Roof (Light Test Only)	<input checked="" type="checkbox"/>					
Brake Pushrod Travel	<input checked="" type="checkbox"/>					

I hereby certify that on November 18, 2025, I personally inspected the equipment described above and this is a true and correct report of the results of such inspection.

SIGNATURE OF INSPECTOR _____

I hereby certify that the person who made the inspection covered by this report was qualified and competent to make such inspection.

SIGNATURE OF AUTHORIZED SIGNATURE _____

- ON TRAILERS WITH GREASE TYPE BEARINGS:
- REMOVE WHEELS
 - CLEAN BEARINGS
 - INSPECT AND REPACK
 - CLEAN, INSPECT GEARING CUPS
 - CLEAN & PACK HUB CAVITIES