

POV INSPECTION CHECKLIST

For use of this form, see Fort Knox Reg 385-10

OWNER/OPERATOR'S NAME: _____

UNIT: _____ DUTY PHONE: _____

YEAR/TYPE VEHICLE: _____ MILEAGE: _____

ITEM	<u>SAT</u>	<u>UNSAT</u>	<u>REMARKS</u>
1. LIGHTS			
a. Headlights			_____
b. Taillights			_____
c. Backing lights			_____
d. Emergency flashers			_____
e. Turn signal indicators			_____
f. Brake lights			_____
2. GLASS			
a. Windshield			_____
b. Rear window			_____
c. Rear-view mirror			_____
3. EXHAUST SYSTEM			_____
4. WINDSHIELD WIPERS/WASHERS			_____
5. HORN			_____
6. STEERING SYSTEM			_____
7. BRAKE SYSTEM			
a. Driving brakes			_____
b. Emergency brake			_____
8. TIRES (including spare and changing equipment)			_____
9. SUSPENSION SYSTEM/SHOCK ABSORBERS/SPRINGS			_____

OVERALL RATING _____

COMMENTS _____

10. PRIVATELY OWNED VEHICLE (4-WHEEL)

YES

NO

- a. Valid Driver's License
- b. Valid State Registration
- c. Proof of Insurance
- d. Successfully completed AAC
- e. Safety Belts Present and Operational **i:i**
- f. Is this the only vehicle you own?
- g. (Only if Item 10f is NO) Is this the vehicle you intend to drive during the holiday period?

11. PRIVATELY OWNED VEHICLE (2-WHEEL)

- a. Valid Operator's License
- b. Valid State Registration
- c. Proof of Insurance
- d. Successfully completed AMSC **n**
- e. Helmet, DOT Approved
- f. Safety Gear: Eye Protection, Full-fingered gloves, long trousers, long-sleeved shirt or jacket, high-visibility garmets (bright color for day and retro-reflective for night), leather boots or over-the-ankle shoes?
- g. Is this the only vehicle you own?
- h. (Only if Item 11g is NO) Is this the vehicle you intend to drive during the holiday period?

DATE INSPECTED: _____

INSPECTOR: _____

COMMENTS: