

**Off Road Utility Vehicle Pre-Ride Check List**

Date: \_\_\_\_\_ Operator Name: \_\_\_\_\_

Station: \_\_\_\_\_

**Trip Plan**

Date of Trip: \_\_\_/\_\_\_/\_\_\_ Supervisor Signature: \_\_\_\_\_

Time Departed: \_\_\_\_\_ AM PM Estimated Time of Return: \_\_\_\_\_ AM PM

Planned Travel Route/Destination: \_\_\_\_\_  
 \_\_\_\_\_

Objective of trip: \_\_\_\_\_

Number of Employees on Trip: \_\_\_\_\_ Name(s) of other employees: \_\_\_\_\_

Mode of Communications: Two-way radio  Cell Phone  Cell #: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

**Inspection Check List**

Item	OK	Repairs	Notes	Item	OK	Repairs	Notes
Front Tire PSI				Exhaust System			
Rear Tire PSI				Muffler			
Tire Condition				Shocker Absorbers			
Wheel/Axle Nuts				Body Condition			
Tracks				Foot Rests			
Skis				Seat Belts			
Controls				Cargo Rack(s)			
Throttle Cable				Tool Kit			
Throttle Function				Tire Gauge			
Hand Brake Controls				Extra Spark Plug(s)			
Hand Brake Function				Spark Plug Wrench			
Foot Brake				Rope			
Foot Brake Function				Duct Tape			
Parking Brake				Owners Manual			
Ignition Switch				Fire Extinguisher			
Engine Stop Switch							
Battery				Accessories			
Emergency Start System				Winch			
Headlights				Other: _____			
Stop/Tail Lights				Other: _____			
Fuel Level				Other: _____			
Coolant Level				Other: _____			
Engine Oil Level							
Engine Oil Condition				Comments:			
Gear Oil Level							
Fuel Leaks							
Oil Leaks							
Engine Air Filter							
Drive Chain							
Drive Belt							
Drive Shafts							
Steering Components							