

CAP-USAF Vehicle Inspection Checklist							
Date:		Wing:		License:		Reg #:	
Mileage:		Unit Assigned to:		2wd or 4wd:		Wing ID#:	
Inspector:		Make of Vehicle:		Model:		Color:	
Year:							
Static Inspection				Under Hood Inspection			
Item	Sat	Unsat	Comment	Item	Sat	Unsat	Comment
Windshield Condition	<input type="checkbox"/>	<input type="checkbox"/>		Battery Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Windows Cond/Oper	<input type="checkbox"/>	<input type="checkbox"/>		Bake Fluid	<input type="checkbox"/>	<input type="checkbox"/>	
CAP Seals / Markings	<input type="checkbox"/>	<input type="checkbox"/>		Exhaust System	<input type="checkbox"/>	<input type="checkbox"/>	
CAP Forms 73/74/78	<input type="checkbox"/>	<input type="checkbox"/>		Oil Quantity	<input type="checkbox"/>	<input type="checkbox"/>	
Hi Beam Headlights	<input type="checkbox"/>	<input type="checkbox"/>		Coolant Quantity	<input type="checkbox"/>	<input type="checkbox"/>	
Low Beam Headlights	<input type="checkbox"/>	<input type="checkbox"/>		Belts/Hoses	<input type="checkbox"/>	<input type="checkbox"/>	
Tail Lights	<input type="checkbox"/>	<input type="checkbox"/>		Exterior Inspection			
Brake Lights	<input type="checkbox"/>	<input type="checkbox"/>		Item	Sat	Unsat	Comment
Turn Signals	<input type="checkbox"/>	<input type="checkbox"/>		Body Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Flashers	<input type="checkbox"/>	<input type="checkbox"/>		Paint Condition	<input type="checkbox"/>	<input type="checkbox"/>	
License Plate Light	<input type="checkbox"/>	<input type="checkbox"/>		Door Operation	<input type="checkbox"/>	<input type="checkbox"/>	
Back Up Light	<input type="checkbox"/>	<input type="checkbox"/>		Door Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Back Up Alarm	<input type="checkbox"/>	<input type="checkbox"/>		Window Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Wiper Blades	<input type="checkbox"/>	<input type="checkbox"/>		Window Operation	<input type="checkbox"/>	<input type="checkbox"/>	
Wiper Operation	<input type="checkbox"/>	<input type="checkbox"/>		Bumper Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Foot / Hand Brake	<input type="checkbox"/>	<input type="checkbox"/>		Tire Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Horn	<input type="checkbox"/>	<input type="checkbox"/>		Tire Wear (Min 1/16")	<input type="checkbox"/>	<input type="checkbox"/>	
Seats	<input type="checkbox"/>	<input type="checkbox"/>		Tire Inflation	<input type="checkbox"/>	<input type="checkbox"/>	
Seatbelts	<input type="checkbox"/>	<input type="checkbox"/>		Driving Check			
Shoulder Harness	<input type="checkbox"/>	<input type="checkbox"/>		Take Vehicle to Highway Speed and Check for Safe and Satisfactory Operation.			
Seat Latching	<input type="checkbox"/>	<input type="checkbox"/>		Item	Sat	Unsat	Comment
Rearview Mirror	<input type="checkbox"/>	<input type="checkbox"/>		Steering	<input type="checkbox"/>	<input type="checkbox"/>	
Side Mirror(s)	<input type="checkbox"/>	<input type="checkbox"/>		Braking	<input type="checkbox"/>	<input type="checkbox"/>	
Radio Mounts	<input type="checkbox"/>	<input type="checkbox"/>		Suspension	<input type="checkbox"/>	<input type="checkbox"/>	
CAP Added Wiring	<input type="checkbox"/>	<input type="checkbox"/>		Drive Train	<input type="checkbox"/>	<input type="checkbox"/>	
Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>		Alignment	<input type="checkbox"/>	<input type="checkbox"/>	
First Aid Kit	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Spare Tire	<input type="checkbox"/>	<input type="checkbox"/>		Trailer Inspection			
Tire Tools	<input type="checkbox"/>	<input type="checkbox"/>		Item	Sat	Unsat	Comment
Proof of Insurance	<input type="checkbox"/>	<input type="checkbox"/>		Running Lights	<input type="checkbox"/>	<input type="checkbox"/>	
Comments:				Brake Lights	<input type="checkbox"/>	<input type="checkbox"/>	
				Brakes	<input type="checkbox"/>	<input type="checkbox"/>	
				Hitch	<input type="checkbox"/>	<input type="checkbox"/>	
				Safety Chain	<input type="checkbox"/>	<input type="checkbox"/>	
				License Current	<input type="checkbox"/>	<input type="checkbox"/>	
				Tires	<input type="checkbox"/>	<input type="checkbox"/>	
				Door Latch	<input type="checkbox"/>	<input type="checkbox"/>	