

Ambulance Service				
Name of Service	Operator ID N N N N	Contact Person	Phone Number	
Ambulance				
EHS Unit Number	Year	Make	VIN	Odometer Reading

This is an inspection list only! No repairs/adjustments are to be done without prior approval of the owner.

<div style="transform: rotate(-45deg); font-weight: bold;">CONDITION REPAIRED</div>	Key: (✓) OK (x) Reject (O) Out of Service	<div style="transform: rotate(-45deg); font-weight: bold;">CONDITION REPAIRED</div>	<div style="transform: rotate(-45deg); font-weight: bold;">CONDITION REPAIRED</div>
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A Cab & Patient Compartment	C Tires and Wheels	F Engine Compartment															
A.1 Driver/Passenger Seats & Seatbelts A.2 Windshield A.3 Cab Windows A.4 Side & Rear Windows A.5 Mirrors A.6 Sun Visors A.7 Accelerator Pedal A.8 Transmission Neutral Safety Switch A.9 Starter Operation & Draw Tests A.10 Brake Pedal A.11 Switches A.12 Instruments A.13 Indicator Lamps A.14 Instrument Lamps A.15 Windshield Wipers & Washers A.16 Windshield Defroster A.17 Interior Heaters (Front & Rear) A.18 Air Conditioners (Front & Rear) A.19 Engine Cover (Dog House) & Seal A.20 Horn	C.1 Tread Section of Tire C.2 Sidewalls C.3 Tire Pressure C.4 Disc Wheels C.5 Tread Depth ___ LF ___ mm ___ RF ___ mm ___ L/R, Inner ___ mm ___ L/R, Outer ___ mm ___ R/R, Inner ___ mm ___ R/R, Outer ___ mm C.6 Spare Tire ___ mm D Brakes D.1 Disc Brakes Front & Rear ___ Hardware (calipers, etc) ___ Rotors, condition ___ LF Runout thickness: ___ ___ RF Runout thickness: ___ ___ LR Runout thickness: ___ ___ RR Runout thickness: ___ D.2 Brake Pads, condition ___ LF: ___ mm ___ RF: ___ mm ___ LR: ___ mm ___ RR: ___ mm D.3 Drum Brakes, if equipped ___ Hardware (adjusters, cylinders, etc.) ___ Drum Condition ___ LR diameter: ___ mm ___ RR diameter: ___ mm D.4 Brake Shoes, condition ___ LR: ___ mm ___ RR: ___ mm D.5 Vacuum System D.6 Vacuum Brake Booster D.7 Vacuum Supply Pump D.8 Hydraulic System D.9 Hydraulic Booster D.10 Brake Leakage & Pedal Reserve D.11 Parking Brake Mechanism D.12 Parking Brake Function	F.1 Hood & Safety Latch F.2 Drive Belts F.3 Power Steering F.4 Wiring F.5 Batteries F.6 Battery Load Test (1/2 CCA Rating) <table style="width:100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">Start</td> <td style="text-align: center;">Finish</td> </tr> <tr> <td>___ Chassis #1</td> <td style="text-align: center;">___ v</td> <td style="text-align: center;">___ v</td> </tr> <tr> <td>___ Chassis #2</td> <td style="text-align: center;">___ v</td> <td style="text-align: center;">___ v</td> </tr> <tr> <td>___ Conversion #1</td> <td style="text-align: center;">___ v</td> <td style="text-align: center;">___ v</td> </tr> <tr> <td>___ Conversion #2</td> <td style="text-align: center;">___ v</td> <td style="text-align: center;">___ v</td> </tr> </table> If electronic tester used, voltages are not required. Failed Electronic Test = Out of Service F.7 Alternator Output: ___ Amps F.8 Engine F.9 Cooling System F.10 Heater Hoses		Start	Finish	___ Chassis #1	___ v	___ v	___ Chassis #2	___ v	___ v	___ Conversion #1	___ v	___ v	___ Conversion #2	___ v	___ v
	Start	Finish															
___ Chassis #1	___ v	___ v															
___ Chassis #2	___ v	___ v															
___ Conversion #1	___ v	___ v															
___ Conversion #2	___ v	___ v															
B Steering and Suspension	E Fuel, Exhaust and Drive Line	G Lighting & Warning Devices															
B.1 Steering Wheel Tests (Lash & Travel) B.2 Front Wheel Bearings & Spindles B.3 Steering Linkage B.4 Wheel Alignment B.5 Ball Joints B.6 Kingpin Play B.7 Suspension Attachments B.8 Stabilizer (Anti-sway) Bar B.9 Leaf Spring Suspension B.10 Coil Spring Suspension B.11 Torsion Bar Suspension B.12 Shock Absorbers B.13 Rear Wheel Bearings B.14 Air Ride Suspension System B.15 MOR/ryde Suspension	E.1 Gasoline or Diesel Fuel System E.2 Exhaust System E.3 Transmission E.4 Differential E.5 Drive Line E.6 4-Wheel Drive, Front Drive Line	G.1 Lamps G.2 Ambulance Emergency Lamps G.3 Fog/Driving Lamps G.4 Head Lamp Aim G.5 Siren G.6 Back-up Alarm															
Repairs, Inspecting Agency	H Body and Frame	I Ambulance Body & Hardware															
Work Order # _____ Repairs, Inspecting Agency Name _____ Work Order # _____ Repairs, Inspecting Agency Name _____ Work Order # _____	H.1 Frame Rails H.2 Body Mounts (Modular Body) H.3 Body Floor Pan H.4 Body Sheet Metal H.5 Bumpers - Front & Rear	I.1 Doors, Entrance & Exterior Comp I.2 Entrance & Exit Steps I.3 Flooring I.4 Mud Flaps I.5 Accessories															
Repairs, Inspecting Agency	J Road Test	Comments															
Name _____ Work Order # _____	J.1 Transmission Operation J.2 Steering J.3 Drive Train Noise J.4 Speedometer Operation J.5 Odometer Operation J.6 Braking	_____ _____ _____ _____ _____ _____ _____															

Comments _____ _____ _____ _____ _____ _____ _____	Inspecting Agency Address City Province Postal Code Phone Number I certify that I have performed this inspection in accordance with the standards set out in the Ambulance Safety Inspection Manual, Volume 4 and that this form fairly represents the condition of the ambulance at the time of inspection. Mechanic(s) Name (print) Journeyman Certificate Number Signature Date
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