

Vehicle Owner: _____ Licence: _____

Address: _____ Telephone: _____

Year: _____ Make: _____ Model: _____

VIN #: _____

Odometer: _____ Taxi Company: _____ Colour: _____

OK	REPAIR	BRAKES	OK	REPAIR	STEERING
		PEDAL FREE PLAY			TIE ROD ENDS
		MASTER CYLINDER			IDLER ARM
		BRAKE HOSES-FRONT			LOWER BALL JOINTS
		BRAKE HOSES-REAR			STEERING BOX
		VISUAL LEAKS-FRONT			CONTROL ARM BUSHING
		VISUAL LEAKS-REAR			SHOCK ABSORBERS
		PARKING BRAKE			STEERING ABILITY ON ROAD TEST
		BRAKING ABILITY ON ROAD TEST			

OK	REPAIR	TIRES	OK	REPAIR	EXHAUST SYSTEM
		FRONT-LEFT			MANIFOLD
		FRONT-RIGHT			EXHAUST PIPE
		REAR-LEFT			MUFFLER
		REAR-RIGHT			TAIL PIPE
		SPARE			SUPPORTS
		BALANCE			COMMENTS:
		ALIGNMENT			
		WHEEL BEARINGS			
		AXLE BEARINGS			

OK	REPAIR	LIGHTS-FRONT	OK	REPAIR	LIGHTS-REAR
		SIGNALS			SIGNALS
		4-WAY FLASHERS			4-WAY FLASHERS
		PARKING LIGHTS			TAIL LIGHTS
		SIDE MARKERS			SIDE MARKERS
		HEADLIGHTS-HIGH			BRAKE LIGHTS
		HEADLIGHTS-LOW			BACKUP LIGHTS
		TAXI TOP LIGHT			

OK	REPAIR	OTHER	OK	REPAIR	OTHER
		HORN			HOOD LATCH
		DOOR LATCHES			WIPERS
		WASHERS			SIGNAL LIGHT INDICATORS
		MIRRORS			HEATER
		SEAT BELTS			GLASS
		SPEEDOMETER			BUMPERS

GENERAL COMMENTS (vehicle body condition, etc...)

I HEREBY CERTIFY THAT THE VEHICLE DESCRIBED HAS BEEN MECHANICALLY INSPECTED AND HAVE INDICATED THAT THE ITEMS TO BE INSPECTED ARE EITHER ON ORDER OR NOTED FOR REPAIR.

Mechanic's Name: _____

Company: _____ Certificate #: _____

Signature: _____ Inspection Date: _____

The personal information on this form is being collected for the purpose of determining eligibility of a taxi company to have mechanically sound vehicles to operate a taxi business. The information is collected under the authority of Section 33 (c) of the Freedom of Information and Protection of Privacy Act. Questions regarding the collection of this information can be directed to the privacy officer at 780-980-7177, #1 Alexandra Park, Leduc, Alberta T9E 4C4.