

**EHD: Full Comprehensive Vehicle Monthly Check Sheet - KIA 2700**

Date:
Time:

**Veh Reg: LS75FVGP - Vin Nr: KNCSHX71LR7742280 - Make/Model/Year: KIA 2700 2024**

Driver Name:	
Licence Disc Expiry Date:	
Kilometer Reading:	
Last Date Serviced:	
Next Service Km/Date:	

**Documentation**

Item	Checked (Yes/No)	Comments/Action
Company Driver's Trip Sheet Book	Yes <input type="checkbox"/> No <input type="checkbox"/>	

**1) Vehicle - Interior**

Item	Satisfactory (Yes/No)	Comments/Action
1.1) Heating	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.2) Air conditioning (where applicable)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.3) Windshield defogging system	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.4) Window Winder	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.5) Door handles / locks	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.6) Alarm/Netstar/Tracker	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.7) Seats	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.8) Seat belts work and free of damage	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.9) Interior lights - Roof Light	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.10) Rear view Mirror in good working condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.11) Warning lights on	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.12) Check all Switches: Light, Indicators, Wipers, Handbrake	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.13) Horn	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.14) Fuses	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.15) GPS	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.16) Fuel Level	Yes <input type="checkbox"/> No <input type="checkbox"/>	
1.17) Radio	Yes <input type="checkbox"/> No <input type="checkbox"/>	

**2) Engine Compartment**

Item	Satisfactory (Yes/No)	Comments/Action
2.1) Engine oil level	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.2) Coolant level (anti-freeze)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.3) Battery secured (No leaks)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.4) Brake fluid level	Yes <input type="checkbox"/> No <input type="checkbox"/>	

2.5) Transmission fluid level	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.6) Windshield washer water level	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.7) Clutch Fluid(if Hydraulic Clutch)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.8) All caps and Dipstick intact and correctly fitted and free of leaks	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.9) Any abnormal Noisies	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.10) Engine Starts properly	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.11) Check under vehicle for any engine leaks	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.12) Belts in good Condition and not making any noise	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.13) Engine Fuses	Yes <input type="checkbox"/> No <input type="checkbox"/>	
2.14) Power steering fluid	Yes <input type="checkbox"/> No <input type="checkbox"/>	

### 3) Vehicle - Exterior

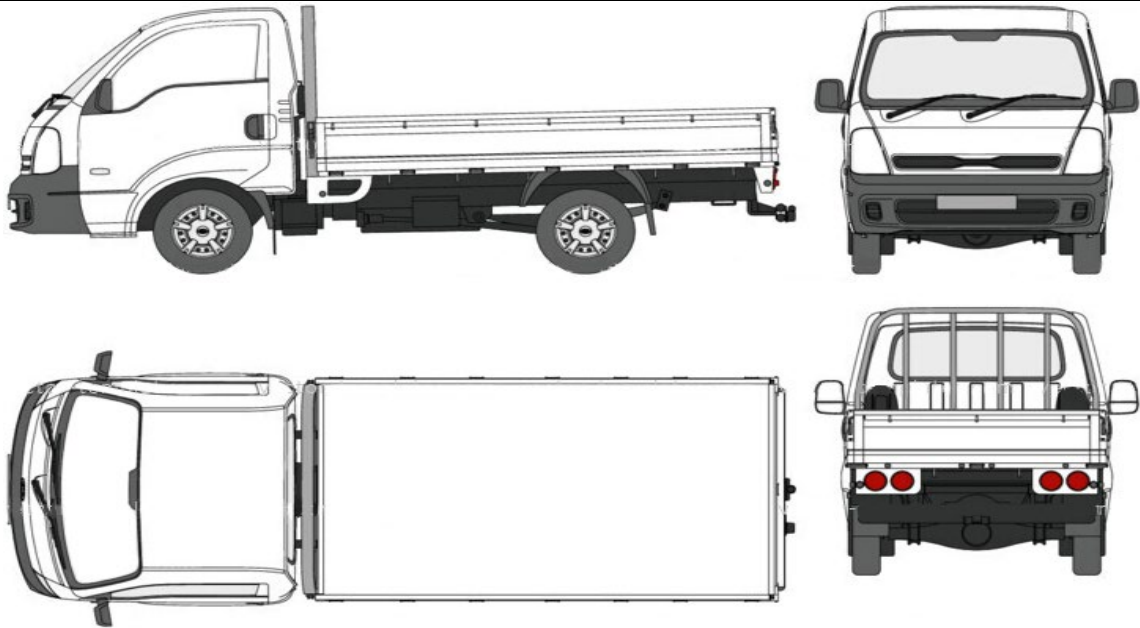
Item	Satisfactory	Comments/Action
	(Yes/No)	
3.1) Windows/windshield not severely cracked/Chips	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.2) Windshield wipers in Good Condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.3) Headlights (Brights/Dimm)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.4) Indicator lights Front	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.5) Tail lights / brake lights	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.6) Indicator lights Rear	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.7) Tires in good condition (no damages /properly inflated).	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.8) No oil / grease leaks (at wheel seals or under the vehicle)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.9) No fuel leaks or odour of Petrol/diesel detected	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.10) Side mirrors in good condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.11) Exhaust system is in good condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.12) Wheel fasteners fitted tightly	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.13) Vehicle is free of excessive damage	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.14) Antenna(broken)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
3.15) Canopy: Windows, Locks, Tailgate	Yes <input type="checkbox"/> No <input type="checkbox"/>	

### 4) Vehicle - Recovery + HSE

Item	Satisfactory	Comments/Action
	(Yes/No)	
4.1) Spare Wheel - in good condition and inflated	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.2) Jack - in full working condition	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.3) Wheel spanner	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.4) Fire Extinguisher - Serviced and fitted checked by HSE officer	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.5) First aid kit - Stocked + checked by HSE Officer	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.6) Safety clothes	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.7) Vehicle Triangle	Yes <input type="checkbox"/> No <input type="checkbox"/>	

4.8) Tie down straps(3 Sets)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
4.9) Accident Guide + Report (Glove Box)	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Road test by Supervisor/Manager + Driver	Additional Comments



Drawing is for illustration purposes only

Additional Comment(s):	

Inspection Performed by:

Driver Name + Signature: \_\_\_\_\_

Supervisor + Signature: \_\_\_\_\_

Manager name: \_\_\_\_\_ Manager signature: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_