



Riverside County Sheriff's Department
 Old Town Substation
 28690 Mercedes Street, Suite B
 Temecula, CA 92590

Taxicab Automotive Inspection Checklist

CAB NO: _____ **Vehicle License Plate:** _____ **CAB VIN:** _____

	Pass	Requires Attention
A. BRAKES		
a. Regular braking system	_____	_____
b. Emergency/Park braking system	_____	_____
B. SUSPENSION		
a. All systems	_____	_____
C. ENGINE		
a. Good running condition with no major / minor problems	_____	_____
D. Safety Equipment		
a. Glass/windows (replace cracks/missing/broken) All components are in working order	_____	_____
b. Seat belts (operational/conforms to manufacturers specification)	_____	_____
c. "FASTEN YOUR SEATBELT" Sign posted	_____	_____
d. "NO SMOKING SIGN" posted	_____	_____
e. Lights (Operational and n proper working order)	_____	_____
f. Headlight/drive	_____	_____
g. Turn signals	_____	_____
h. Parking lights	_____	_____

- | | | |
|--|-------|-------|
| i. Emergency lights/flashers | _____ | _____ |
| j. Dashboard interior lights | _____ | _____ |
| k. Taximeter lights | _____ | _____ |
| l. Top/sign light | _____ | _____ |
| m. Interior dome light | _____ | _____ |
| n. Windshield wipers | _____ | _____ |
| E. Upholstery | | |
| a. Torn or worn our fabric | _____ | _____ |
| b. Cleanliness | _____ | _____ |
| F. Cleanliness | | |
| a. Vehicle is clean throughout driver and passenger cabins | _____ | _____ |
| b. Trunk | _____ | _____ |

LIST ANY DISCREPENCIES OR CORRETIVE ACTIONS NECESSARY FOR COMPLIANCE OF THIS VEHICLE HERE:

By signing this inspection notice you are certifying that you have completed the inspection and are stating the vehicle is in compliance:

I cetfiy that cab no. _____, license plate no. _____, VIN no. _____ with a mileage reading of _____

_____ Was inspected by _____
(NAME OF AUTHORIZED INSPECTION STATION)

at the address of:

on _____ by: _____
(NAME of Mechanic/Inspectors Signature)

BAR No: _____