

CIRCLE ONE 2031 2082 2033 2034	No Less Than Weekly Rig Check	REVIEWING OFFICER:
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X = Corrective Action Needed (see log below)

√ = Inspected OK

Apparatus Inspection Area	Head each column below with date and Inspector						
Lights							
Sirens/Horns							
Operators Panel							
Mirrors							
Seats Belts							
Windows Clean							
Windshield Wipers							
A/C and Heat							
Fuel							
Engin Oil Level							
Radiator Level							
Power Steering Level							
Tires and tire pressure							
Body							
Brake Test							
Cleanliness							

Equipment Inspection Area	Head each column below with date and inspector						
Compartment- ments	Inventory						
	Secure						
Medical Equipment	Function						
	Secure						
Powered Equipment	Function						
	Secure						
ALS Supplies	Function						
	Secure						
BLS Supplies	Function						
	Secure						
Safety Equipment	Function						
	Secure						
Extnguisher	Charged						
	Secure						

Log of Corrective Actions Needed and Notes				
Date	Inspector	Corrective Actions and Notes	Completed	
			By	Date