

TAXI CAB VEHICLE INSPECTION

COMPANY NAME: _____ DATE: _____

YEAR/MAKE OF VEHICLE _____ COLOR: _____

STATE LICENSE #: _____ V.I.N.: _____

COMPANY CAB #: _____

INSPECTION LIST

	PASS	REJECT
Brakes, in good operating condition (reg/emerg.)	_____	_____
Doors (4), Windows (4), in good working order	_____	_____
Defroster (seasonal).....	_____	_____
Double locks on each door	_____	_____
Lights (brake/head/plate/tail/turn signals/backup/4 ways)	_____	_____
Mirror	_____	_____
Muffler.....	_____	_____
Speedometer (within 3 mph)	_____	_____
Tires in good condition.....	_____	_____
Windshield wipers/washer.....	_____	_____
Vehicle clean and sanitary condition	_____	_____

SPECIAL EQUIPMENT REQUIRED

Company name displayed on back doors	_____	_____
Driver's ID card holder in cab.....	_____	_____
Rate card displayed in cab	_____	_____
Taximeter installed, displayed to view	_____	_____
Taximeter in good operation (metermile).....	_____	_____

This vehicle complies with the standards of safety described in Chapter 36, City Code, and the provisions of the State Motor Vehicle Code. In addition it meets the special requirements for licensing as a taxicab. (Code, Sec. 37-51).

INSPECTED BY: _____ EMP. #: _____