



Technical Inspection Checklist

V E H I C L E	
Owner:	
Plate ID:	
Year/Make/Model:	

M I N I M U M V E H I C L E S A F E T Y R E Q U I R E M E N T S			
Seatbelts, Driver:	Yes / No	Seatbelts, Passengers:	Yes / No
Rollbar/ Hardtop:	Yes / No	Secure Battery Hold Down:	Yes / No
Front Attachment Points:	Yes / No	Rear Attachment Points:	Yes / No
Charged Fire Extinguisher:	Yes / No	Tx/Rx Radio, Tuned & Tested:	Yes / No

Inspector:

Name:	Signature & Date:
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R e c o m m e n d e d A d d i t i o n a l - S a f e t y R e q u i r e m e n t s			
First Aid Kit:	Yes / No	ToolKit:	Yes / No
Tow Strap(no metal):	Yes / No	Mirrors:	Yes / No
Working Jack(Applicable reach):	Yes / No	Functional Lights:	Yes / No
Spare Tire & Change Tools:	Yes / No	<input type="checkbox"/> Head <input type="checkbox"/> Turn <input type="checkbox"/> Tail <input type="checkbox"/> Brake	

Notes:

- » This inspection checklist is not all inclusive - each owner is responsible for their own Vehicle's safety, and maintenance.
- » Each owner is responsible for their Idaho State Law compliance.

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