

DATE

**RECORD OF ANNUAL INSPECTION**

(49 CFR, 396.17-23)

Prepare Separate Report for Each Vehicle Inspected

D0272662

COMPANY NAME			VEHICLE TYPE <input type="checkbox"/> TRUCK <input type="checkbox"/> TRACTOR <input type="checkbox"/> TRAILER <input type="checkbox"/> CONVERTER <input type="checkbox"/> DOLLY		
STREET ADDRESS			VEHICLE MAKE		MODEL YEAR
CITY	STATE	ZIP	VEHICLE IDENTIFICATION (Company No., State Tag No. or VIN)		
INSPECTOR'S NAME (Please Print)				EMPLOYEE NO.	

**REPORT OF CONDITION** (For Detailed Information on Inspection Procedures see FMCSR Section 396, Appendix G)

	OK	REPAIR		OK	REPAIR		OK	REPAIR		OK	REPAIR
<b>BRAKES</b>			<b>EXHAUST</b>			<b>STEERING</b>			<b>FRAME</b>		
Adjustment			Leaks			Adjustment			Members		
Mechan. Compon.			Placement			Column/Gear			Clearance		
Drum/Rotor			<b>LIGHTING</b>			Axle					
Hose/Tubing			Headlights			Linkage			<b>TIRES</b>		
Lining			Tail/Stop			Power Steering			Tread		
Low Air Warning			Clearance/Marker			Other			Inflation		
Trailer Air Supply			Identification			<b>FUEL SYSTEM</b>			Damage		
Compressor			Reflectors			Tank(s)			Other		
Parking Brakes			Other			Lines					
Other									<b>WHEELS/RIM</b>		
			<b>CAB/BODY</b>			<b>SUSPENSION</b>			Fasteners		
<b>COUPLERS</b>			Access			Springs			Disc/Spoke		
Fifth-Wheel & Mount			Eqpt./Load Secure			Attachments					
Pin/Upper Plate			Tie-Downs			Sliders			<b>WINDSHIELD</b>		
Pintle-Hook/Eye			Headerboard								
Safety Chain(s)			Other			<b>MIRRORS</b>			<b>WINDSHLD. WIP.</b>		

**REMARKS**

Certification: This vehicle has passed all the inspection items for the annual vehicle inspection in accordance with 49 CFR Part 396.

QUALIFIED INSPECTOR'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

APPLY LABEL TO A CLEAN, DRY SURFACE. USE WITH AN OVERLAMINATE (221-SN) TO IMPROVE DURABILITY UNDER NORMAL WEATHER CONDITIONS.

AN INDELIBLE INK MARKER IS RECOMMENDED FOR USE WHEN FILLING OUT THE LABEL. INDELIBLE INK IS PERMANENT AND WILL NOT WASH OFF, BUT MAY FADE DUE TO EXPOSURE TO ULTRAVIOLET LIGHT OVER TIME. CAREFUL DISCRETION IS ADVISED REGARDING APPLICATION OF LABEL TO AN AREA NOT EXPOSED TO EXCESSIVE ULTRAVIOLET LIGHT AND/OR ELEMENTS AND IT IS RECOMMENDED THAT THE READABILITY OF THE LABEL BE CHECKED PERIODICALLY.

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**FEDERAL ANNUAL INSPECTION**THIS VEHICLE HAS PASSED AN ANNUAL INSPECTION  
CONDUCTED IN ACCORDANCE WITH 49 CFR, PART 396, FMCSR

MONTH YEAR

D0272662

VEHICLE ID (Company No.)

STATE/TAG NO. OR VIN

LOCATION OF RECORDS:

Company \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_