McMaster University
Department of Physical Plant
Material Handling and Trucking Daily Vehicle Circle Check

THIS CHECK TO BE COMPLETED BEFORE USING VEHICLE, KEPT IN VEHICLE DURING OPERATION AND SUBMITTED TO SUPERVISOR AFTER COMPLETION OF SHIFT.
Please be considerate of others-Keep cab and cargo box clean!!

☐ Light duty vehicles (car, van, pick-up) ☐ Heavy duty vehicles (trucks, construction equipment)
☐ Trailer  Trailer Number__________

Division:___________  Odometer/Hourmeter Reading:__________  Vehicle Number:_______
Date:_______________  Time:_________________  Operator:_________________

UNDER THE HOOD
☐ Engine oil level  ☐ Windshield washer
☐ Radiator Fluid  ☐ Auto trans. level
☐ Powering steering level  ☐ Belts
☐ Brake fluid  ☐ Hoses and connections

AROUND THE VEHICLE
☐ Body damage  ☐ Hyd. Tank  ☐ Reflectors  ☐ Plate condition
☐ Mirrors  ☐ Wheels  ☐ Lights operation  ☐ Dumpbox
☐ Exhaust system  ☐ Fasteners  ☐ Clearance lights  ☐ Tailgate
☐ Fuel system  ☐ Pools under vehicle  ☐ Four way flashers  ☐ Chains
☐ Springs  ☐ Backup alarm  ☐ Brake lights  ☐ Tarp & tiedowns
☐ Shackles  ☐ Backup lights  ☐ Yellow/blue lights  ☐ Load security
☐ Tires  ☐ License marker light  ☐ Towing/coupling device

IN THE CAB
☐ Adjust seat  ☐ Windows  ☐ Horn  ☐ Dash lights
☐ Seat belts  ☐ Windshield  ☐ Oil  ☐ Ownership
☐ Mirrors  ☐ Wipers  ☐ Temp.  ☐ Insurance
☐ Steering wheel  ☐ Defrost  ☐ Charging system  ☐ CVOR (4500 GVW >)
☐ Clutch  ☐ Heater  ☐ Accelerator operation  ☐ F.A Kit
☐ Brake pedal  ☐ Extinguisher (when applicable)  ☐ Flares (when applicable)

Defects Found:  ☐ Yes  □ No  Defects reported:  ☐ Yes  ☐ No  Repairs done:  ☐ Yes  ☐ No

Repair Date:___________________________  Supervisor:____________________________

Defects Found on Circle Check:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

ANY DEFECTS FOUND ARE TO BE REPORTED IMMEDIATELY TO YOUR SUPERVISOR