



## **Safety Check**

Meets ASE Task: Not specified

Name:	Date:	Time on Task:
Make/Model/Year:	VIN:	
Evaluation (Enter number from 4, 3, 2, 1) :		
1. Check the headlights (brights and continued).	dim).	ot OK
2. Check the taillights and the side ma	arker lights. OK	Not OK
3. Check the brake lights, the turn sig	gnals, and the license plate	lights. OK Not OK Not OK
4. Check the windshield wipers (all sp	peeds) and wiper blades.	OK Not OK
5. Check the heater-defroster fan (all	speeds). OK	Not OK
6. Check the condition of the tires (m not forget to check the spare tire!		•
7. Check for looseness in the steering	g wheel (less than 2" of play	/).
8. Check the 4-way emergency flashe	ers. OK Not	OK
9. Check the horn. OK	Not OK	
10. Listen for exhaust system leaks.	OK	
11. Check the parking brake (maximun	n 8-10 "clicks"). 🔲 OK	Not OK
12. Check brake pedal for play and pro	oper height. OK	□ Not OK

