



Natural Resources Conservation Service
100 USDA, Suite 206
Stillwater, OK 74074-2655
405.742.1203

August 5, 2004

OKLAHOMA BULLETIN NO. OK120-4-4

SUBJECT: ADS – Conduct Visual Inspection of All Vehicles

Purpose: To provide guidance on conducting visual inspection of all vehicles.

Expiration Date: September 30, 2004

ACTION REQUIRED BY SEPTEMBER 5, 2004

All vehicles assigned to NRCS offices are required to have a Visual Safety Inspection Checklist form completed annually. If you discover any safety deficiency on the vehicle, please note it on the form, and have the deficiency corrected immediately.

The driver of the vehicle is the responsible person who needs to maintain the vehicle in a safe operating condition. Failure to maintain the vehicle in a safe operating condition can lead to serious injury and property damage, and the employee may be held liable.

For vehicle repairs exceeding \$500.00, please contact John Glover or Les Conner for approval before taking action to have the vehicle repaired.

Send the completed form to:

John Glover, Acting State Administrative Officer
100 USDA Suite 206
Stillwater, Oklahoma 74074-2655

/S/(John Glover, Acting)

M. DARREL DOMINICK
State Conservationist

Attachment

DIST: AE

VISUAL SAFETY INSPECTION CHECKLIST

Locations: _____

License No: _____

Odometer Reading: _____

Vehicle Type: _____ Make: _____ Year: _____

Property Number AG000 _____

Interior

- ____ Brake pedal travel
- ____ Parking brake
- ____ Clutch pedal (free play)
- ____ Mirrors (rear and side view)
- ____ Horn operational
- ____ Seat belts
- ____ Windshield wipers/washer
- ____ Heater/defroster
- ____ Air Conditioner

Emergency Kit

- ____ First aid kit
- ____ Fire Extinguisher

Tires

- ____ Tire pressure
(including spare)
- ____ Tire tread wear

Body

- ____ Head and parking lights
- ____ Tail and back up lights
- ____ Turn signals
- ____ Hazard lights
- ____ Tag lights
- ____ Brake lights

Steering

- ____ Sway or drift
- ____ Excessive play
- ____ Binding

Comments: _____

Mechanical inspections are performed by a qualified licensed mechanic in accordance with State and local requirements or manufacturer recommended schedules.

Inspection Performed By: _____ (Date)
Signature (NRCS Employee)

Deficiencies Noted Above Repaired On: _____ (Date)