



FLEET VEHICLE REPAIR ORDER



WORK ORDER# _____

TIME: _____

UNIT # _____

DATE: _____

ODOMETER/HR: _____

☐ ROUTINE SERVICE

BODY

- ☐ Turn Lights
- ☐ Marker Lights
- ☐ Brake Lights
- ☐ Fire Extinguisher
- ☐ Glass
- ☐ Damage

FLUIDS

- ☐ Engine Oil
- ☐ Transmission Fluid
- ☐ Hydraulic Fluid
- ☐ Washer Fluid
- ☐ Brake Fluid
- ☐ Antifreeze

HYDRAULIC

- ☐ Leak
- ☐ Cylinder
- ☐ Hose
- ☐ Controls
- ☐ PTO

BRAKES

- ☐ Emergency Brake
- ☐ Low Pedal
- ☐ ABS Light
- ☐ Brake Noise
- ☐ Vibration

Heater/Air Conditioner

- ☐ No Heat
- ☐ No AC
- ☐ Blower
- ☐ Controls
- ☐ Coolant Smell - Windshield Fogging

CHARGING SYSTEM

- ☐ Battery
- ☐ Alternator
- ☐ Cables

ENGINE

- ☐ Running Problem
- ☐ Check Engine Light
- ☐ Exhaust Leak
- ☐ Coolant Leak
- ☐ Oil Leak

SUSPENSION

- ☐ Springs
- ☐ Shocks
- ☐ Noise
- ☐ Loose Steering

TIRES

- ☐ Low Pressure
- ☐ Check Replacement
- ☐ Check Balance
- ☐ Rotate Tires

INTERIOR

- ☐ Seat
- ☐ Head Liner
- ☐ Mirror
- ☐ Rear View Mirror
- ☐ Attachments

EXTERIOR

- ☐ Windshield Wipers
- ☐ Side View Mirrors
- ☐ Running Boards/Steps
- ☐ Antennas

DRIVER'S REMARKS: _____

PRINT DRIVER'S NAME: _____

DRIVER'S SIGNATURE: _____

Name and Phone Number to contact when completed: _____