



# Vehicle Maintenance Inspection Sheet

Technician: \_\_\_\_\_

Date In		Customer Name		Phone Number	
Date Out		Visit Purpose			
Vehicle Number	Vehicle Model	Model year	KM	Fuel	Body Number
				G. D. H. L. E	

1. Engine ON				2. Engine OFF			
a. Inside the Vehicle							
Project	Score	Note	Project	Score	Note	Project	Score
①  Parking Brake			⑦  Engine oil Level	<input type="text"/>			
②  A/T shift			⑧  Brake fluid (Level & Color)	<input type="text"/>			
③  OBD (Warning Light)			⑨  ATF (Automatic Transmission Fluid)				
④  A/C Smell & Temp			⑩  Brake pad & Disc wear inspection				
b. Bonnet							
Project	Score	Note	Project	Score	Note	Project	Score
⑤  Valve cover gasket leak			⑪  Gear oil & Transfer case oil				
⑥  Blow by Gas			⑫  Coolant (Specific Gravity Level)				
⑭  Valve tappet noise	<input type="text"/>		⑬  Spark plug & Combustion Chamber				
⑮  Timing Belt & Timing Chain NOISE	<input type="text"/>		⑯  CRDI injector washer	<input type="text"/>		⑰  Valve Stem seal (Exhaust gas color)	<input type="text"/>
⑰  Battery & Generator	<input type="text"/>		⑲  Drive Belt	<input type="text"/>		⑱  Oil cap (Engine oil Sludge)	<input type="text"/>
⑲  Cooling line leakage	<input type="text"/>		⑲  Intake Carbon	<input type="text"/>		⑲  Antifreeze Cap & Pressure	<input type="text"/>

\* Score : O - Good, Δ - Normal, X - Bad

This report reflects the vehicle's condition at the time of inspection and may vary with future driving or usage.

Today's Work	Recommended Work