



LYFT DRIVER INFO

ALL FIELDS ARE MANDATORY

LYFT DRIVER NAME		EMAIL ADDRESS	
LICENSE PLATE #	VIN		
VEHICLE MAKE	VEHICLE MODEL	VEHICLE YEAR	
LYFT DRIVER SIGNATURE	LYFT DRIVER PHONE NUMBER		

ASE VEHICLE INSPECTION CHECKLIST

INSPECTION POINT	PASS	FAIL	INSPECTION POINT	PASS	FAIL
1. Foot brakes	<input type="checkbox"/>	<input type="checkbox"/>	13. Horn	<input type="checkbox"/>	<input type="checkbox"/>
2. Emergency brake (parking brake)	<input type="checkbox"/>	<input type="checkbox"/>	14. Speedometer	<input type="checkbox"/>	<input type="checkbox"/>
3. Steering mechanism	<input type="checkbox"/>	<input type="checkbox"/>	15. Bumpers	<input type="checkbox"/>	<input type="checkbox"/>
4. Windshield	<input type="checkbox"/>	<input type="checkbox"/>	16. Muffler and exhaust system	<input type="checkbox"/>	<input type="checkbox"/>
5. Rear window and other glass	<input type="checkbox"/>	<input type="checkbox"/>	17. Tires, incl. tread depth	<input type="checkbox"/>	<input type="checkbox"/>
6. Windshield wipers	<input type="checkbox"/>	<input type="checkbox"/>	Left front	<input type="checkbox"/>	<input type="checkbox"/>
7. Headlights	<input type="checkbox"/>	<input type="checkbox"/>	Right front	<input type="checkbox"/>	<input type="checkbox"/>
8. Tail lights	<input type="checkbox"/>	<input type="checkbox"/>	Left rear	<input type="checkbox"/>	<input type="checkbox"/>
9. Turn indicator lights	<input type="checkbox"/>	<input type="checkbox"/>	Right rear	<input type="checkbox"/>	<input type="checkbox"/>
10. Stop lights	<input type="checkbox"/>	<input type="checkbox"/>	18. Interior and exterior rear view mirrors	<input type="checkbox"/>	<input type="checkbox"/>
11. Front seat adjustment	<input type="checkbox"/>	<input type="checkbox"/>	19. Safety belts for driver and passenger(s)	<input type="checkbox"/>	<input type="checkbox"/>
12. Doors (open, close, lock)	<input type="checkbox"/>	<input type="checkbox"/>			

VEHICLE INSPECTION (Circle One)

PASS FAIL

TO BE COMPLETED BY INSPECTOR

Note: This inspection shall be performed by an American Advanced Technicians Institute (AATI) certified mechanic or a National Institute for Automotive Service Excellence (ASE) certified mechanic or by a mechanic that is under the supervision of an AATI or ASE certified mechanic.

COMPANY NAME	INSPECTOR NAME
COMPANY/FACILITY ADDRESS	INSPECTION DATE (document expires one year from this date)
VEHICLE MILEAGE	AATI/ASE CERTIFICATION NO.
<input type="checkbox"/> I certify that I am qualified to conduct brake inspections pursuant to the requirements of 49 CFR – Part 396.25.	
INSPECTOR SIGNATURE	NAME OF SUPERVISING AATI OR ASE CERTIFIED MECHANIC (IF DIFFERENT FROM ABOVE)