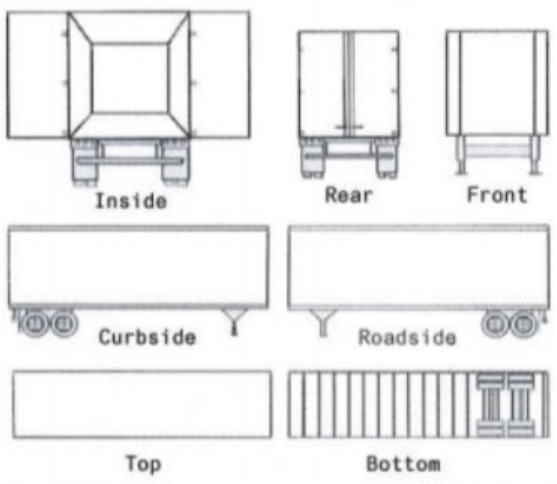


# Equipment Inspection Form

TRAILER DESCRIPTION		
Vin: _____	Type: _____	Size: _____
Unit#: _____	P.O.#: _____	

## ORIGIN

Location: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Item	New	Damaged	Damage Description
Lights			
Bulk Head			
Wheels			
Tires			
Suspension			
Brakes			
Connect Device			
Landing Gear			
Mud Flaps			

Pickup Date: \_\_\_\_\_

Outgate By: \_\_\_\_\_

Driver Name: \_\_\_\_\_

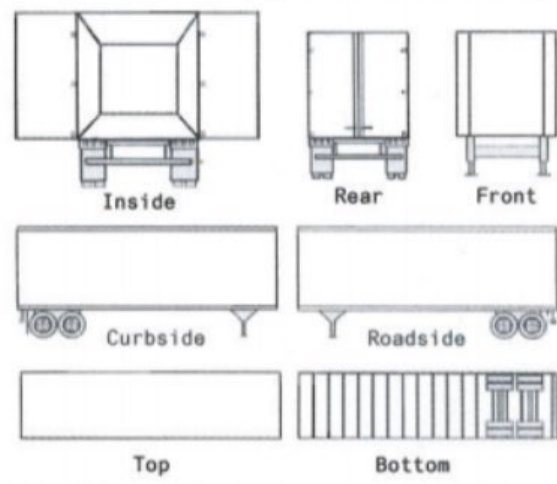
Carrier: \_\_\_\_\_

Truck: \_\_\_\_\_

Signature: \_\_\_\_\_

## DESTINATION

Location: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



Item	New	Damaged	Damage Description
Lights			
Bulk Head			
Wheels			
Tires			
Suspension			
Brakes			
Connect Device			
Landing Gear			
Mud Flaps			

Delivered Date: \_\_\_\_\_

Received By: \_\_\_\_\_

Driver Name: \_\_\_\_\_

Carrier: \_\_\_\_\_

Truck: \_\_\_\_\_

Signature: \_\_\_\_\_