

School Vehicle Inspection Certification - Type A

Name of Owner - Organization or Institution																									
Street Address/RFD and Box Number		City	County	State Zip Code																					
Vehicle Year	Make	Vehicle Identification Number		Body Mfgr.																					
Tag #	Vehicle #	Odometer Reading																							
<p>• Pull all wheels. Inspection includes all items included in COMAR 11.14.02 (Type II) and 11.14.04 (Type I) (See Back of Form)</p>																									
<table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td colspan="3">Brake readings for all four wheels. If replacements are needed, correct and show replacement readings.</td> </tr> <tr> <td style="width: 40%;">Pads or Linings</td> <td colspan="2">Discs or Drums</td> </tr> <tr> <td>Measure in 32nds</td> <td>inches</td> <td>thousandths</td> </tr> <tr> <td>R.F. _____</td> <td>R.F. _____</td> <td>• _____</td> </tr> <tr> <td>L.F. _____</td> <td>L.F. _____</td> <td>• _____</td> </tr> <tr> <td>R.R. _____</td> <td>R.R. _____</td> <td>• _____</td> </tr> <tr> <td>L.R. _____</td> <td>L.R. _____</td> <td>• _____</td> </tr> </table>					Brake readings for all four wheels. If replacements are needed, correct and show replacement readings.			Pads or Linings	Discs or Drums		Measure in 32nds	inches	thousandths	R.F. _____	R.F. _____	• _____	L.F. _____	L.F. _____	• _____	R.R. _____	R.R. _____	• _____	L.R. _____	L.R. _____	• _____
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Name of Inspection Station/Facility		Station/Facility Number	Work Order Number																						
Street Address/RFD and Box Number		City	County	State Zip Code																					
<p>As required by the Code of Maryland Regulations, I hereby certify, under penalty of perjury, that a Type A inspection has been performed on the above listed vehicle.</p> <p>I further certify that any and all defects have been corrected and <u>this vehicle is in safe operating condition.</u></p>																									
Date of Inspection		Printed Name of Inspector	Signature of Inspector																						
Signature of individual responsible for repairs		Signature of owner, local superintendent or authorized agent																							
<p>If this form is not filled out completely it will be returned and the inspection considered incomplete.</p>																									

✓	CHASSIS
	Group I - Suspension & Frame
	1. Ball Joints: <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	2. Drag Link: <input type="checkbox"/> Adj. <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	3. Tie Rods: <input type="checkbox"/> End <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Adj. <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	4. Springs: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	5. Shackles (Bolts) <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	6. Shock Absorbers
	7. Front End Alignment
	8. King Pins & Bushings: <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Replace
	9. Steering Column: "U" Joint
	10. Steering Gear Box - <input type="checkbox"/> Adjust <input type="checkbox"/> Tighten
	11. Steering Linkage
	12. Power Steering Mechanism & Hoses: <input type="checkbox"/> Adj. <input type="checkbox"/> Replace
	13. Body Attachment
	Group II - Brakes and Wheels
	1. Service: <input type="checkbox"/> Adj. <input type="checkbox"/> Reline <input type="checkbox"/> Squeak <input type="checkbox"/> Grab <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	2. Parking: <input type="checkbox"/> Adj. <input type="checkbox"/> Reline
	3. Air or Vacuum Booster <input type="checkbox"/> Leak <input type="checkbox"/> Replace
	4. Low indicator: <input type="checkbox"/> Air <input type="checkbox"/> Vacuum
	5. Emergency System
	6. Brake Lines: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	7. Brake Drums/Rotors: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	8. Master Cylinder: <input type="checkbox"/> Leak <input type="checkbox"/> Brake Hose
	9. Wheel Cylinder: <input type="checkbox"/> Leak <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	10. Wheel Bearing: <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Adj. <input type="checkbox"/> Replace
	11. Wheel Lug Nuts: <input type="checkbox"/> Loose <input type="checkbox"/> Missing
	12. Tires: <input type="checkbox"/> R.F. <input type="checkbox"/> L.F. <input type="checkbox"/> R.R.O. <input type="checkbox"/> R.R.I. <input type="checkbox"/> L.R.O. <input type="checkbox"/> L.R.I.
	Group III - Engine & Exhaust
	1. Air Cleaner - <input type="checkbox"/> Tighten <input type="checkbox"/> Clean <input type="checkbox"/> Repair
	2. Alternator-Generator - <input type="checkbox"/> Replace <input type="checkbox"/> Tighten
	3. Battery Cable Holddown <input type="checkbox"/> Clean <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	4. Drive Belts - <input type="checkbox"/> Adj. <input type="checkbox"/> Replace
	5. Fuel Leaks - <input type="checkbox"/> Carb. <input type="checkbox"/> Fuel Pump <input type="checkbox"/> Tank
	6. Gaskets and Seals
	7. Engine Mounts: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> R <input type="checkbox"/> L
	8. Radiator-Heater Hose <input type="checkbox"/> Top <input type="checkbox"/> Bottom <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	9. Lines and Wiring
	10. Engine Operation
	11. Clutch: <input type="checkbox"/> Adj. <input type="checkbox"/> Slipping <input type="checkbox"/> Replace
	12. Engine Cleanliness - <input type="checkbox"/> Oil Leak <input type="checkbox"/> Valve Cover <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Filter
	13. Manifold Leak
	14. Exhaust & Tail Pipes: <input type="checkbox"/> Length <input type="checkbox"/> Replace <input type="checkbox"/> Tighten
	15. Clamp: <input type="checkbox"/> Tighten <input type="checkbox"/> Replace <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
	16. Muffler: <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	17. P.C.V. Valve

✓	BODY
	Group IV - Lighting and Glazing
	1. Head - <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Tighten <input type="checkbox"/> Replace
	2. Stop and Tail: <input type="checkbox"/> R <input type="checkbox"/> L
	3. Warning Flasher: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> R
	4. Clearance Cluster: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> R
	5. Turn Signal - Hazard: <input type="checkbox"/> F <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> R
	6. Interior - Step Well
	7. Back Up: <input type="checkbox"/> R <input type="checkbox"/> L
	8. License Plate
	9. Instrument Panel - Wiring
	10. Glass: Window - Doors
	11. Glass: Windshield
	12. Windshield Wipers - Blades <input type="checkbox"/> Adj. <input type="checkbox"/> Replace
	13. Odometer
	Group V - Emergency Equipment
	1. Fire Extinguisher: <input type="checkbox"/> Replace <input type="checkbox"/> Tighten
	2. First Aid Kit - Cleanliness: <input type="checkbox"/> Refill <input type="checkbox"/> Replace
	3. Flares: <input type="checkbox"/> Replace
	4. Reflectors
	5. Body Fluid Kit: <input type="checkbox"/> Refill <input type="checkbox"/> Replace
	Group VI - General
	1. Body: <input type="checkbox"/> Paint
	2. Body: <input type="checkbox"/> Condition & Repair
	3. Lettering
	4. Mirror: <input type="checkbox"/> Exterior <input type="checkbox"/> Interior <input type="checkbox"/> R <input type="checkbox"/> L <input type="checkbox"/> Cross Over <input type="checkbox"/> Replace <input type="checkbox"/> Tighten
	5. Service Door
	6. Emergency Door: <input type="checkbox"/> Buzzer <input type="checkbox"/> Latch
	7. Emergency Exit
	8. Heater-Defroster: <input type="checkbox"/> Switch <input type="checkbox"/> Motor <input type="checkbox"/> Replace <input type="checkbox"/> Tighten
	9. Horn/s
	10. Seat Frames: <input type="checkbox"/> R <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> L <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
	11. Upholstery: <input type="checkbox"/> Back <input type="checkbox"/> Cushion <input type="checkbox"/> Pads <input type="checkbox"/> R <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> L <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
	12. Floor Coverings: <input type="checkbox"/> Cement <input type="checkbox"/> Replace
	13. Driver Seat Belt
	14. Interior Condition
	15. Miscellaneous



Apply to register to vote with your driver's license transaction. For details ask your customer service representative.