

Equipment ID OTRT H11505	VIN 5V8VC5325ST502556	Year 2025	Manufacturer VANGUARD	Primary Plate ME 5309242
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**XTRA Lease DOT / BIT Inspection and PM Worksheet**  
Check Mark = OK    X = Needs Further Attention    R = Repaired    N/A = Not Applicable

<input checked="" type="checkbox"/> Gold Hands & Rubber Grommets	Repaired	<input type="checkbox"/>	Sub-Frame -- Slide Rails and Crossmembers	Repaired
<input checked="" type="checkbox"/> 2-Way Electrical Plug	Repaired	<input type="checkbox"/>	Aerodynamic Side Skirts	Repaired
<input checked="" type="checkbox"/> Registration, Valid License Plate and sticker	Repaired	<input checked="" type="checkbox"/>	Slider Mechanism & Locking Pins - Lubricate, Release, Re-engineer	Repaired
<input checked="" type="checkbox"/> Lights, Wiring and Splice Conditions	Repaired	<input checked="" type="checkbox"/>	Proper Lubricant Level in each Wheel End - Fill if necessary	Repaired
<input checked="" type="checkbox"/> Exterior Trailer - Body Condition and Coupling Device	Repaired	<input checked="" type="checkbox"/>	Wheels - Check for Cracks / Tire Matching	Repaired
<input checked="" type="checkbox"/> Trailer Locking Devices	Repaired	<input checked="" type="checkbox"/>	Tires - free of impermissible damage or wear	Repaired
<input checked="" type="checkbox"/> Landing Gear Legs / Gear Box and Bracing - Lubricate & Cycle	Repaired	<input checked="" type="checkbox"/>	Nuts -- Torque to 450-500 ft/lbs -- Set wrench to 500 ft/lbs	Repaired
<input checked="" type="checkbox"/> Fuel Tank and Fuel System (Reefer)	Repaired	<input checked="" type="checkbox"/>	Metal Flow-Thru Valve Stem Caps	Repaired
<input checked="" type="checkbox"/> Air Brake System - Test for Leaks	Repaired	<input checked="" type="checkbox"/>	Conspicuity Tape--Side Panels, Rear Doors, Headboards	Repaired
<input checked="" type="checkbox"/> Dump Valve (Air Ride Only) - Test operation and check for Leaks	Repaired	<input checked="" type="checkbox"/>	Modifiaps, Brackets, and Rubber Dock Bumpers	Repaired
<input checked="" type="checkbox"/> ABS System - Actuate	Repaired	<input checked="" type="checkbox"/>	Rear Impact Guard	Repaired
<input checked="" type="checkbox"/> Air Lines - Check for damage / wear / chaffing	Repaired	<input checked="" type="checkbox"/>	Doors -- Proper Operation	Repaired
<input checked="" type="checkbox"/> Suspension Hangers	Repaired	<input checked="" type="checkbox"/>	Door Hold Backs and Pull Handles - Present & Functional	Repaired
<input checked="" type="checkbox"/> Air Tank and Mounting Brackets	Repaired	<input checked="" type="checkbox"/>	All Hinges, Rollers, Locks -- Lubricate	Repaired
<input checked="" type="checkbox"/> Brakes - Drums / Linings / Air Chambers	Repaired	<input checked="" type="checkbox"/>	Interior Trailer -- Floor, Roof, and Side Walls	Repaired
<input checked="" type="checkbox"/> Brakes -- ADB / Rotors, Calipers, Pistons, Chambers, Pads	Repaired	<input checked="" type="checkbox"/>	Interior -- Resecure Plywood as Needed	Repaired
<input checked="" type="checkbox"/> Slack Adjusters / S-cams / Brake adjustment -- Lubricate & adjust	Repaired	<input checked="" type="checkbox"/>	DOT Inspected -- Sticker Applied	Repaired
<input checked="" type="checkbox"/> Suspension / U-Bolts / Springs	Repaired	<input checked="" type="checkbox"/>	California BIT Inspected & Passed	Repaired
<input checked="" type="checkbox"/> Flatbed Winches -- Lubricate and Cycle	Repaired	<input checked="" type="checkbox"/>	NOTES:	Repaired

TIRES (in 32nds)					
Axle	Position	TD	Brand	PSI	
1	LO Front	13	Yellow	110	
	LI Front	13	Blue	110	
2	LO Middle	13	Blue	110	
	LI Middle	13	Blue	110	
3	LO Rear	13	Blue	110	
	LI Rear	13	Blue	110	

Brakes (Drum in 8ths / ADB in mm)			
Axle	Position	Drum	ADB
1	L Front	7/8	
	R Front	7/8	
2	L Middle	7/8	
	R Middle	7/8	
3	L Rear	7/8	
	R Rear	7/8	

Hubo: 3402.

Engine Hrs: \_\_\_\_\_

Prot. Time: \_\_\_\_\_

Fuel Hrs: \_\_\_\_\_

By signing and dating this form the inspector certifies (i) the accuracy and completeness of the inspection of this vehicle in compliance with all of the requirements of 49 C.F.R. Part 396, and (ii) that the vehicle has passed inspection in accordance with 49 C.F.R. Part 396, 17.

Inspection conducted by: [Signature]  
(Inspector signature)  
Print Name: Justin E. Jones

Inspection Date: 05/08/25

Company Name: XTRA Lease LLC