

ANNUAL VEHICLE INSPECTION REPORT

VEHICLE HISTORY RECORD

| REPORT NUMBER | FLEET UNIT NUMBER |
|---------------|-------------------|
| 65650979 | W 94924 |
| DATE 03/12/24 | |

| | |
|---|--|
| MOTOR CARRIER OPERATOR Ziggy Freight Inc dba Royal 3 Inc | INSPECTOR'S NAME (PRINT OR TYPE) Jugoslav Kovacevic |
| ADDRESS 6850 W. 63rd St. | THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19. <input checked="" type="checkbox"/> YES |
| CITY, STATE, ZIP CODE Chicago, IL 60638 | VEHICLE IDENTIFICATION (✓ AND COMPLETE) <input type="checkbox"/> LIC. PLATE NO. <input checked="" type="checkbox"/> VIN <input type="checkbox"/> OTHER 1GRIPO629NJ324 |
| VEHICLE TYPE <input type="checkbox"/> TRACTOR <input checked="" type="checkbox"/> TRAILER <input type="checkbox"/> TRUCK <input type="checkbox"/> BUS <input type="checkbox"/> (OTHER) | INSPECTION AGENCY/LOCATION (OPTIONAL) |

VEHICLE COMPONENTS INSPECTED

| OK | NEEDS REPAIR | REPAIRED DATE | ITEM | OK | NEEDS REPAIR | REPAIRED DATE | ITEM | OK | NEEDS REPAIR | REPAIRED DATE | ITEM |
|-------------------------------------|--------------|---------------|--|-------------------------------------|--------------|---------------|---|-------------------------------------|-------------------------------------|---------------|---|
| 1. BRAKE SYSTEM | | | | 6. SAFE LOADING | | | | 12. WINDSHIELD GLAZING | | | |
| <input checked="" type="checkbox"/> | | | a. Service Brakes | <input checked="" type="checkbox"/> | | | a. Vehicle parts, load, dunnage, spare tire, etc., secured. | <input checked="" type="checkbox"/> | | | No cracks, discoloration, obstacles, etc. (see 393.60 for exceptions). |
| <input checked="" type="checkbox"/> | | | b. Parking Brake System | <input checked="" type="checkbox"/> | | | b. Front End Structure | <input checked="" type="checkbox"/> | | | 13. WINDSHIELD WIPERS |
| <input checked="" type="checkbox"/> | | | c. Brake Drums or Rotors | <input checked="" type="checkbox"/> | | | c. Intermodal Container Securement Devices | <input checked="" type="checkbox"/> | | | No missing, damaged, or inoperable wipers. |
| <input checked="" type="checkbox"/> | | | d. Brake Hose | <input checked="" type="checkbox"/> | | | 7. STEERING MECHANISM | <input checked="" type="checkbox"/> | | | 14. MOTORCOACH SEATS |
| <input checked="" type="checkbox"/> | | | e. Brake Tubing | <input checked="" type="checkbox"/> | | | a. Steering Wheel Free Play | <input checked="" type="checkbox"/> | | | Seats securely fastened to the vehicle structure. |
| <input checked="" type="checkbox"/> | | | f. Low Pressure Warning Device | <input checked="" type="checkbox"/> | | | b. Steering Column | <input checked="" type="checkbox"/> | | | 15. REAR IMPACT GUARD |
| <input checked="" type="checkbox"/> | | | g. Tractor Protection Valve | <input checked="" type="checkbox"/> | | | c. Front Axle Beam/All Other Steering Components | <input checked="" type="checkbox"/> | | | In place, securely attached, proper size, proper placement (see 393.86). |
| <input checked="" type="checkbox"/> | | | h. Air Compressor | <input checked="" type="checkbox"/> | | | d. Steering Gear Box | <input checked="" type="checkbox"/> | | | 16. OTHER |
| <input checked="" type="checkbox"/> | | | i. Electric Brakes | <input checked="" type="checkbox"/> | | | e. Pitman Arm | <input checked="" type="checkbox"/> | | | List any other condition(s) which may prevent safe operation of this vehicle. |
| <input checked="" type="checkbox"/> | | | j. Hydraulic Brakes | <input checked="" type="checkbox"/> | | | f. Power Steering | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | k. Vacuum Systems | <input checked="" type="checkbox"/> | | | g. Ball and Socket Joints | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | l. Antilock Brake System | <input checked="" type="checkbox"/> | | | h. Tie Rods and Drag Links | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | m. Automatic Brake Adjusters | <input checked="" type="checkbox"/> | | | i. Nuts | <input checked="" type="checkbox"/> | | | |
| 2. COUPLING DEVICES | | | | 8. SUSPENSION | | | | | | | |
| <input checked="" type="checkbox"/> | | | a. Fifth Wheels | <input checked="" type="checkbox"/> | | | a. Axle Positioning Parts | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | b. Pintle Hooks | <input checked="" type="checkbox"/> | | | b. Spring Assembly | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | c. Drawbar/Towbar Eye | <input checked="" type="checkbox"/> | | | c. Torque, Radius or Tracking Components | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | d. Drawbar/Towbar Tongue | <input checked="" type="checkbox"/> | | | 9. FRAME | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | e. Safety Devices | <input checked="" type="checkbox"/> | | | a. Frame Members | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | f. Saddle-Mounts | <input checked="" type="checkbox"/> | | | b. Tire and Wheel Clearance | <input checked="" type="checkbox"/> | | | |
| 3. EXHAUST SYSTEM | | | | 10. TIRES | | | | | | | |
| <input checked="" type="checkbox"/> | | | a. No leaks forward of/ directly below the driver/sleeper compartment. | <input checked="" type="checkbox"/> | | | a. Steer-Axle Tires | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | b. Bus: No leaking/ discharging in violation of standard. | <input checked="" type="checkbox"/> | | | b. All Other Tires | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | c. Unlikely to burn, char, or damage the electrical wiring, fuel supply, or any combustible part of vehicle. | <input checked="" type="checkbox"/> | | | c. Speed-Restricted Tires | <input checked="" type="checkbox"/> | | | |
| 4. FUEL SYSTEM | | | | 11. WHEELS AND RIMS | | | | | | | |
| <input checked="" type="checkbox"/> | | | a. No visible leak. | <input checked="" type="checkbox"/> | | | a. Lock or Side Ring | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | b. Fuel Tank Filler Cap | <input checked="" type="checkbox"/> | | | b. Wheels and Rims | <input checked="" type="checkbox"/> | | | |
| <input checked="" type="checkbox"/> | | | c. Fuel tank securely attached. | <input checked="" type="checkbox"/> | | | c. Fasteners | <input checked="" type="checkbox"/> | | | |
| 5. LIGHTING DEVICES | | | | | | | | d. Welds | <input checked="" type="checkbox"/> | | |
| <input checked="" type="checkbox"/> | | | All required lights/reflectors operable. | <input checked="" type="checkbox"/> | | | | | | | |

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ IF ITEMS DO NOT APPLY, ☒ REPAIRED DATE

CERTIFICATION: THIS VEHICLE HAS PASSED ALL THE INSPECTION ITEMS FOR THE ANNUAL VEHICLE INSPECTION IN ACCORDANCE WITH 49 CFR PART 396.