

## ANNUAL VEHICLE INSPECTION REPORT

## VEHICLE HISTORY RECORD

REPORT  
NUMBER

FLEET UNIT NUMBER

67129260

850

DATE

08/16/24

MOTOR CARRIER OPERATOR

LICKI TRANSPORTATION INC dba BRT

INSPECTOR'S NAME (PRINT OR TYPE)

JUGOSCAV KOVACEVIC

ADDRESS

8225 LECALRE AVE.

THIS INSPECTOR MEETS THE QUALIFICATION REQUIREMENTS IN SECTION 396.19.

☒ YES

CITY, STATE, ZIP CODE

BURBANK, IL 60459

VEHICLE IDENTIFICATION (✓ AND COMPLETE) ☐ LIC. PLATE NO. ☒ VIN ☐ OTHER

1MAN4GYXPM031932

VEHICLE TYPE ☐ TRACTOR ☐ TRAILER ☒ TRUCK ☐ BUS  
☐ (OTHER)

INSPECTION AGENCY/LOCATION (OPTIONAL)

## VEHICLE COMPONENTS INSPECTED

| OK                                  | NEEDS<br>REPAIR | REPAIRED<br>DATE | ITEM                                                                                                         | OK                                  | NEEDS<br>REPAIR | REPAIRED<br>DATE | ITEM                                                        | OK                                  | NEEDS<br>REPAIR | REPAIRED<br>DATE | ITEM                                                                          |
|-------------------------------------|-----------------|------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------|------------------|-------------------------------------------------------------|-------------------------------------|-----------------|------------------|-------------------------------------------------------------------------------|
| <b>1. BRAKE SYSTEM</b>              |                 |                  |                                                                                                              | <b>6. SAFE LOADING</b>              |                 |                  |                                                             | <b>12. WINDSHIELD GLAZING</b>       |                 |                  |                                                                               |
| <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"/> |                 |                  | <b>13. WINDSHIELD WIPERS</b>                                                  |
| <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"/> |                 |                  | <b>7. STEERING MECHANISM</b>                                | <input checked="" type="checkbox"/> |                 |                  | <b>14. MOTORCOACH SEATS</b>                                                   |
| <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"/> |                 |                  | <b>15. REAR IMPACT GUARD</b>                                                  |
| <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"/> |                 |                  | <b>16. OTHER</b>                                                              |
| <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"/> |                 |                  |                                                                               |
| <b>2. COUPLING DEVICES</b>          |                 |                  |                                                                                                              | <b>8. SUSPENSION</b>                |                 |                  |                                                             |                                     |                 |                  |                                                                               |
| <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"/> |                 |                  | <b>9. FRAME</b>                                             | <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"/> |                 |                  |                                                                               |
| <b>3. EXHAUST SYSTEM</b>            |                 |                  |                                                                                                              | <b>10. TIRES</b>                    |                 |                  |                                                             |                                     |                 |                  |                                                                               |
| <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"/> |                 |                  |                                                                               |
| <b>4. FUEL SYSTEM</b>               |                 |                  |                                                                                                              | <b>11. WHEELS AND RIMS</b>          |                 |                  |                                                             |                                     |                 |                  |                                                                               |
| <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"/> |                 |                  |                                                                               |
| <b>5. LIGHTING DEVICES</b>          |                 |                  |                                                                                                              |                                     |                 |                  |                                                             |                                     |                 |                  |                                                                               |
| <input checked="" type="checkbox"/> |                 |                  | All required lights/reflectors operable.                                                                     | <input checked="" type="checkbox"/> |                 |                  | d. Welds                                                    | <input checked="" type="checkbox"/> |                 |                  |                                                                               |

INSTRUCTIONS: MARK COLUMN ENTRIES TO VERIFY INSPECTION: ☒ OK, ☒ NEEDS REPAIR, ☒ NA 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.