

Auto Repair

Quick visual check for every vehicle that comes in — 10 minutes, one page

Phone: _____

Email: _____

Address: _____

20-POINT PRE-SERVICE CHECK

YEAR	MAKE	MODEL
VIN	LICENSE PLATE	MILEAGE
TECHNICIAN	DATE	RO #

☐ OK ☐ Advise — Recommend service ☐ Urgent — Safety concern

Inspection Item	OK	Advise	Urgent	Notes / Measurements
FLUIDS				
1. Engine oil — level & condition	☐	☐	☐	
2. Coolant — level	☐	☐	☐	
3. Brake fluid — level	☐	☐	☐	
4. Power steering fluid	☐	☐	☐	
5. Windshield washer fluid	☐	☐	☐	
UNDER HOOD				
6. Battery — terminals & hold-down	☐	☐	☐	
7. Engine air filter	☐	☐	☐	
8. Cabin air filter	☐	☐	☐	
9. Drive belt(s)	☐	☐	☐	
10. Hoses	☐	☐	☐	
VISIBILITY & LIGHTS				
11. Wiper blades	☐	☐	☐	
12. Headlights	☐	☐	☐	
13. Tail & brake lights	☐	☐	☐	
14. Turn signals	☐	☐	☐	
15. Horn	☐	☐	☐	
TIRES & BRAKES				
16. Tire pressure — all four	☐	☐	☐	
17. Tread depth — all four	☐	☐	☐	
18. Brake pads — visual	☐	☐	☐	
19. Exhaust — visual	☐	☐	☐	
20. Leaks under vehicle — visual	☐	☐	☐	

ADVISED ITEMS & ESTIMATE GIVEN (Y / N)

Technician signature: _____

Customer signature: _____