

Automotive Workshop

Quick visual check for every vehicle booked in: 10 minutes, one page. Not a roadworthy inspection

Phone: _____

Email: _____

ABN: _____

20-POINT VEHICLE HEALTH CHECK

YEAR	MAKE	MODEL
REGO	VIN	ODOMETER (KM)
TECHNICIAN	DATE (DD/MM/YYYY)	JOB NO.

■ 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. Windscreen washer fluid	☐	☐	☐	
UNDER BONNET				
6. Battery, terminals & clamp	☐	☐	☐	
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. Indicators	☐	☐	☐	
15. Horn	☐	☐	☐	
TYRES & BRAKES				
16. Tyre pressure, all four	☐	☐	☐	
17. Tread depth (mm), all four	☐	☐	☐	
18. Brake pads, visual	☐	☐	☐	
19. Exhaust, visual	☐	☐	☐	
20. Leaks under vehicle, visual	☐	☐	☐	

ADVISED ITEMS & QUOTE GIVEN (Y / N)

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Technician signature: _____

Customer signature: _____