

Fleet Management Inventory Checklist

Date: _____

Location: _____

Prepared by: _____

Vehicle Inventory

Vehicle ID	Make	Model	Year	Condition	Last Maintenance Date	Next Maintenance Due
_____	_____	_____	_____	_____	_____	_____

Equipment Inventory

Equipment ID	Description	Condition	Last Inspected	Next Inspection Due
_____	_____	_____	_____	_____

Comments

Signature: _____