

## HOV Pre-Trip Safety Checklist

Driver: \_\_\_\_\_

Date: \_\_\_\_\_

Destination and duration of trip: \_\_\_\_\_

Department Coordinator: \_\_\_\_\_

### Check if okay

\_\_\_ Tire pressure checked with gauge

\_\_\_ Spare tire

\_\_\_ Tire wear and wheel lugs tight

\_\_\_ Windshield and wipers

\_\_\_ Headlights – High/low

\_\_\_ Mirrors adjusted

\_\_\_ Turn signals & emergency flashers

\_\_\_ Load below seat surface height

\_\_\_ Brake lights

\_\_\_ Seatbelts for all passenger seats

\_\_\_ Oil leaks and loose parts  
underneath

\_\_\_ Copy of checklist to Department Coordinator