

Annual Vehicle Safety Inspection Certification for Exempt Providers

Items to be Inspected	Items O.K.	Items Deficient	Correction or Adjustment made	Comments/Remarks
Tires				
Headlights				
Horn				
Taillights				
Turn Signals				
Brake Lights				
Brakes				
Suspension				
Exhaust System				
Steering				
Windows				
Windshield				
Windshield wipers				
Heating System				

Owner/Operator of Vehicle:

Facility Address: _____

Make and Model of the Vehicle:

Tag Number: _____ **Odometer Reading:**

Mechanic's Signature:

Date of Inspection: _____

(Note: Annual Vehicle Safety Inspection Certification is valid for one year from date of inspection.)