



PMY PREVENTIVE MAINTENANCE

Yearly

Light Trucks (1 ton and under) and Cars



SAFETY FIRST-USE PERSONAL PROTECTIVE EQUIPMENT

VEHICLE _____ W/O _____ DATE _____ MID# _____

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| | REPLACE FUEL FILTER |
| | CHECK OIL LEVEL |
| | INSPECT AIR FILTER: REPLACE IF NEEDED |
| | CHECK ALL LIGHTS FOR PROPER OPERATION |
| | INSPECT ALL FRONT END COMPONENTS |
| | CHECK DIFF FLUID |
| | CHECK TRANS FLUID |
| | CHECK POWER STEERING FLUID |
| | CHECK DRIVE LINES, U JOINTS, CARRIER BEARING |
| | CLEAN DIFF BREATHERS |
| | INSPECT BRAKE LININGS AND PAD WEAR |
| | INSPECT ALL BRAKE COMPONENTS |
| | COOLANT TEST (freeze point) |
| | INSPECT ALL BELTS AND HOSES |
| | CHECK TIRE PRESSURES,CONDITION;ROTATE IF NECESSARY |
| | GLASS CHECK & WIPER OPERATION |
| | CHECK BATTERY CONNECTIONS; CLEAN AND TIGHTEN |
| | CHECK ALL GAUGES AND INSTRUMENT PANEL |
| | INSPECT FOR BODY DAMAGE AND REPORT FINDINGS |
| | VERIFIED VIN AND MILEAGE |

WORK PERFORMED BY _____