

**NEW YORK STATE DEPARTMENT OF TRANSPORTATION  
VEHICLE TROUBLE REPORT**

MAKE	DESCRIPTION	UNIT I.D.					
LOCATION OF UNIT	DATE/TIME	METER READING					

THIS UNIT REQUIRED MECHANICAL ATTENTION AS FOLLOWS:

P.M. SERVICE		BRAKES	
ENGINE <small>Include Engine Electrics</small>		STEERING	
CLUTCH & TORQUE CON.		BODY & CAB	
DRIVELINE <small>Driving Wheels/Axle Transmission Differential</small>		HYDRAULICS	
CHASSIS/SUSPENSION		TIRES	
CHASIS ELECTRICS <small>Lights Wiring</small>		ATTACHMENTS <small>Ladders Buckets</small>	

THIS UNIT IS NOW:

OPERABLE YES <input type="checkbox"/> NO <input type="checkbox"/>		DATE & TIME EMS NOTIFIED	DATE			TIME			AM PM
ITEM NO.	DETAILS					Date Parts Ordered	Comp. EM Init.		
NUMBER OF ITEMS SUBMITTED									
NUMBER OF ITEMS COMPLETED									

SIGNATURE \_\_\_\_\_  
Foreman/Operator/Etc.