

Vehicle Questionnaire

Date \_\_\_\_\_

Vehicle Registration \_\_\_\_\_ Plant No \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_

For each question please **p** box which best represents what you think

	Strongly Agree	Agree	Neither Agree / Disagree	Disagree	Strongly Disagree
Vehicle is fit for purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle is in good condition – taking into account its age and mileage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regular maintenance items for the driver – eg oil, water and screen wash levels are easy to identify and check	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Downtime due to servicing, MOT's and regular maintenance is at an acceptable level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If fitted; auxiliary equipment – eg tipper bodies, taillifts, sweeper equipment, wheelchair lifts, removable seats are fit for purpose (mark as N/A (not applicable) if vehicle has no aux equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: