

## Department of Human Services Office of Facilities and Support Services, Transportation Services Section DHS Vehicle Requirements and Monitoring Form – Administrative Vehicles

| Division Office |   | Monitoring Date     |  |  |
|-----------------|---|---------------------|--|--|
| Location        |   | Region              |  |  |
| Vehicle #       |   | Year                |  |  |
| Make/Model      |   | Mileage             |  |  |
| VIN             |   | Property Decal #    |  |  |
| Тад             | # | Report My Driving # |  |  |
|                 |   |                     |  |  |

□ Leased Vehicle

Emissions testing verified\*

Emissions exempt \*\*

| Exterior Requirements  | Checked | Needs<br>Attention | Signage Requirements                            | Checked | Needs<br>Attention |  |
|------------------------|---------|--------------------|---|---------|--------------------|--|
| Horn                   |         |                    | State Seals                                     |         |                    |  |
| 2 Exterior Mirrors     |         |                    | Vehicle # (RF)                                  |         |                    |  |
| Rearview Mirror        |         |                    | Vehicle # (RR)                                  |         |                    |  |
| Windshield Wipers      |         |                    | Information Packet                              |         |                    |  |
| Windows                |         |                    | Insurance Card                                  |         |                    |  |
| Headlights             |         |                    | Vehicle Log Book                                |         |                    |  |
| Turn Signals (Front)   |         |                    | Insurance/Accident Package                      |         |                    |  |
| Brake Lights           |         |                    |   |         |                    |  |
| Turn Signals (Rear)    |         |                    | Cond. of Vehicle:   Excellent  Good  Fair  Poor |         |                    |  |
| Parking/Reverse Lights |         |                    | Comments:                                       |         |                    |  |
| Emergency Flashers     |         |                    |   |         |                    |  |
| Body Damage            |         |                    |   |         |                    |  |
| Tire / Tread           |         |                    |   |         |                    |  |
| Spare Tire             |         |                    |   |         |                    |  |
| Jack                   |         |                    |   |         |                    |  |
| Interior Requirements  |         |                    |   |         |                    |  |
| Seat Belts             |         |                    |   |         |                    |  |
| First Aid Kit          |         |                    |   |         |                    |  |
| Upholstery             |         |                    | TSS Inspector Signature:                        |         |                    |  |
| Clean Interior         |         |                    |   |         |                    |  |
| Doors                  |         |                    |   |         |                    |  |
| Interior Lights        |         |                    | Vehicle Operator Printed Name and Signature:    |         |                    |  |
| AC/Heat                |         |                    |   |         |                    |  |
| Flooring               |         |                    |   |         |                    |  |

\*\*Required for vehicles operated in Cherokee, Clayton, Cobb, Coweta, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Henry, Paulding and Rockdale counties.