

OWNER/OPERATOR MONTHLY MAINTENANCE RECORD

Name:	Unit #:	Report Month:
Unit Year:	Make:	Plate:

Maintenance Information (Complete Date and Odometer reading. Check off maintenance items.)

Date					
Odometer Reading					
Lubrication					
Visual Inspection					
Brake Adjustment					
Safety					
Oil Change					

Additional Information/Repair Work

Date:	Description:	Work Performed By:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Additional Information (e.g. major repair work, etc.):

Please complete all areas where applicable. Attach copies of all invoices. Use additional pages if necessary.

This is a complete record of all maintenance and/or repairs made to this unit in the last month.

Operator's Signature: _____

Report Date: _____