

Troop 223 Tour Permit Information

Motor Vehicle Checklist

Owner's name _____

Address _____

City, State _____ ZIP _____

Driver's license no. _____ Renewal date _____

Telephone (____) _____

Insurance company _____ Amount of liability coverage \$ _____

Other drivers of same vehicle (this trip only) and driver's license numbers:

_____, _____

Make of Vehicle: _____

Model Year: _____ Color: _____ Auto license no. _____

Basic Safety Check

1. Seat belts for every passenger? _____

2. Tire tread ok? _____ Spare? _____
Jack? _____

3. Brakes ok? _____

4. Windshield wipers operate? _____
Fluid in reservoir? _____

5. Current inspection sticker? _____

6. Headlights and turn signals operating?

7. Rearview mirrors? _____

8. Exhaust system ok? _____

Additional Safety Check

1. Flares for emergencies? _____

2. Fire extinguisher? _____

3. Flashlight? _____

4. Tow chain or rope? _____

5. First-aid kit? _____