

Empty Container and Flatbed 7 Point Inspection Check List

Date: _____
 Carrier Name: _____
 Driver Name: _____
 Tractor #: _____
 Trailer ID Number #: _____

Arrival / Departure Time: _____

Internal Control
Number

Truck-truck License Plate No. # : _____

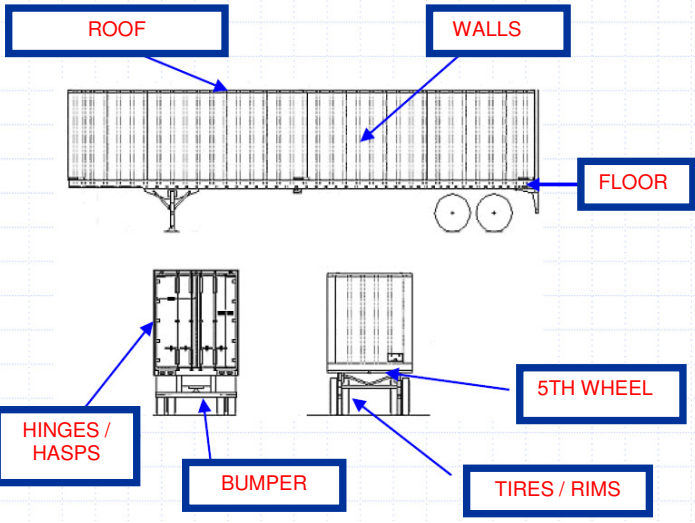
Trailer License Plate No. # : _____

Points of Inspection

- 1 Outside/Undercarriage
- 2 Trailer Floor
- 3 Tires (Trailer)
- 4 Inside/Outside Doors
- 5 Side Walls
- 6 Ceiling/Roof
- 7 Front Wall

OK

Observations



Trailer (Dry Van) Measurements

53'

48'

Inside Measurement

Height

Width

Length

External Measurement

Height

Width

Length

Flatbed: Inspection of double floor: _____

Flatbed: Inspection for new/replaced boards: _____

Flatbed: Inspection of fifth wheel: _____

Observations: _____

Accepted: _____

Denied: _____

Reason: _____

Inspection Certification:

Inspector Name: _____

Signature: _____

Time-Inspection Completed: _____