\_\_\_\_\_\_\_\_\_\_年\_\_\_\_\_\_\_\_\_\_月\_\_單位名稱：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_工作場所名稱：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  | 檢點日期 |  |  |  |  |  |  |  |  |  |  |  |  |
| **一般車輛每次作業前檢點項目** | 檢查人  檢查 簽名  方式 |  |  |  |  |  |  |  |  |  |  |  |  |
| 胎壓、胎紋是否正常 | 目視檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 汽油是否足夠 | 目視檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 電瓶水、水箱水、雨刷水等水位是否正常 | 目視檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 煞車系統功能是否正常 | 操作檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 方向燈、車燈、煞車燈是否正常 | 操作檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 各車門擋風玻璃、雨刷功能是否正常 | 操作檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 車門關閉情形是否正常 | 操作檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 儀錶板功能是否正常 | 目視檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
|  | 檢查 |  |  |  |  |  |  |  |  |  |  |  |  |
| 異常狀況與改善措施： | | | | | 複查：  工作場所負責人簽名：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |