

AMBULANCE REPORT

Name of Agency:	
Date:	
Surveyors:	

Vehicle Checklist Unit #													
Siren (6061.G)													
Emergency Lights (6061.E)													
Inspection Sticker (6061.A)													
Decals Name & Unit # (6061.E)													
Non-Emergency Lights (6061.A)													
Temp Control in Pt Compartment (6065.B)													
Narcotic Storage (6045.C)													
Seat Belts Adult & Pediatric (6061.H)													
Fire Extinguisher (6061.H)													
Refelctive Wear (6061.H)													
Radio Communication (6065.B)													
Airway, Ventilation, Oxygenation (6065.B)													
Bleeding, Hemorrhage Control, Shock Management, Wound Care (6065.B)													
Cardiovascular & Circulation (6065.B)													
Diagnostic Tools (6065.B)													
Infection Control (6041.B/6065.B)													
Medications (6045/6065.B)													
Medication Delivery & Vascular Access (6065.B)													
AED/Defibrillator & Pads (6065.B)													

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Unit:		Unit:	
Inspection:	Exp:	Inspection:	Exp:
VIN:		VIN:	
Mileage:		Mileage:	
License Plate:	Exp:	License Plate:	Exp:

Notes