



Required Monthly Maintenance

For all vehicles under the School Pupil (7D) Temporary Waiver

Registry of Motor Vehicles
 PO Box 55889 · Boston, MA 02205-5889 · Email: Schoolbus7dnotify@dot.state.ma.us

Instructions

Complete this form for each school pupil vehicle to confirm all monthly maintenance checks have been conducted. Submit completed forms by email to Schoolbus7dnotify@dot.state.ma.us.

Maintenance checks shall include a test/verification of:

- ✓ exterior lights
- ✓ required safety equipment
- ✓ overall vehicle condition
- ✓ tires and tire pressure
- ✓ front-end checks (which shall be accomplished by jacking the vehicle)
- ✓ brake and parking brakes
- ✓ exhaust tests

Company Information

Company Name	Contact Person Name	Phone Number
Company Address		

Mechanic Information

Place of Business	Mechanic Name	Phone Number
Mechanic Place of Business Address		

Vehicle Information

Mileage	Plate Number	Make	Model	Year
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Inspection

All exterior lights <input type="checkbox"/> PASS <input type="checkbox"/> FAIL	All required safety equipment <input type="checkbox"/> PASS <input type="checkbox"/> FAIL
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Vehicle condition PASS FAIL

Tires - Tire pressure and tread depth recorded for each tire	FR Tire PSI	FR Tread Depth	FL Tire PSI	FL Tread Depth
	FR Tire PSI	FR Tread Depth	FL Tire PSI	FL Tread Depth

Front end check by jacking vehicle <input type="checkbox"/> PASS <input type="checkbox"/> FAIL	Brake application and parking brake <input type="checkbox"/> PASS <input type="checkbox"/> FAIL
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Exhaust PASS FAIL

Signature and Attestation

I, _____, attest that I have conducted the required maintenance check on the vehicle mentioned above.

Date _____

Name of Mechanic	Signature of Mechanic
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