

(Company Name) Maintenance Plan

Mission Statement

(Company Name) vehicle maintenance mission is to effectively and efficiently provide safe, clean, reliable and comfortable vehicles for use by its operators.

Preventative Maintenance (PM) Program

The emphasis of (Company Name) maintenance program is preventive rather than reactive maintenance. A strong preventive maintenance program effectively reduces overall maintenance costs by decreasing the number of road calls and the high cost of unpredictable repairs caused by reactive maintenance. The PM schedule and requirements are based upon vehicle type and manufacture recommendations. As the manufacturer mileage recommendations are consistently met prior to the time recommendations PM schedules are based on mileage.

Maintenance is performed at specific mileage increments (levels) with specific elements performed every 6, 12, 30, 60 and 102 thousand miles. Level A (6,000) encompasses the engine fluids and tires. Level B (12,000) includes Level A maintenance, the brake system, CV joints, front suspension and the exhaust system. Level C (30,000) includes Level A and the engine air cleaner filter. Level D (60,000) includes Level A and C and the transaxle filter and fluid. Level E (102,000) includes Level A and B, engine coolant, ignition cables and spark plug replacement.

(Company Name) staff continually review the maintenance practices to identify potential improvements to the program. This assures optimum benefits from the scheduled inspections, maximizes useful vehicle life, reduces maintenance costs and ensures that (Company Name) vehicles remain in safe operating condition.

On-Time Inspection Variance

Because of the need to schedule maintenance through an outside vendor, the allowable variance with all preventive maintenance inspections is a minus 750 miles to a plus 750 miles. Any inspection completed within this parameter is considered on time.

(Company Name) Transportation Tracking Protocols

The Transportation Coordinator (TC) is responsible for developing the PM schedule for each type of vehicle WSDOT legally owns and for ensuring all PM activities are completed in a timely manner and are consistent with manufacture's recommendations.

(Company Name) utilizes the services of outside vendors to perform all maintenance. The TC shall ensure that the vendors are properly briefed as to the extent of the particular PM being performed. Additionally the TC conducts a semi annual physical inspection of each vehicle in January and July.

Each driver is required to conduct a pre and post trip inspection on his/her assigned vehicle each day using the Daily Van Inspection Report (DVIR) developed in cooperation with the WUTC. Multiple drivers may use the same vehicle on a given day and each driver complies with this requirement for his/her use. The driver records any problem on the DVIR and calls the TC if conditions requiring immediate attention are discovered. The TC reviews each completed DVIR and schedules work with outside vendors as necessary.

The completed documentation for all preventive maintenance consists of the vendor generated performance/documentation sheets and the (Company Name) PM sheet completed by the TC based upon the vendor performance/documentation sheets. (Necessary because vendors often neglect to fill out additional outside paperwork while performing vehicle maintenance) Vehicle number, date, mileage and any pertinent information is also included. The Vehicle report sheets used by the two vendors (Five Star and Grays Harbor Fast Lube) (Company Name) patronizes often are enclosed for reference.

The TC maintains a complete history for each vehicle that includes documentation of all repairs, inspections and other related maintenance activities.

Service Level "A" Completed Every 6,000 Miles

Vehicle: _____ Date: _____ Odometer: _____

Vendor Performing Service: _____ Report Attached: Yes or No

Check and Service (if necessary) the following:

Repairs/Action Needed

Change Engine Oil

Oil Filter

Coolant Recovery Reservoir Fluid

Transmission Fluid

Power Steering Fluid

Engine Air Cleaner Filter

Tire Wear/Air Pressure (rotate if necessary)

Notes: _____

Service Level "B" Completed Every 12,000 Miles

Vehicle: _____ Date: _____ Odometer: _____

Vendor Performing Service: _____ Report Attached: Yes or No

Check and Service (if necessary) the following:

Repairs/Action Needed

Service Level A

Brake System (linings, hoses, parking, fluid)

CV Joints (initial check at 12,000 then 48, 72, 96 & 120,000)

Replace Air Conditioning Filter

Front Suspension, Tie Rod Ends & Boot Seals

Exhaust System

Notes: _____

Service Level "C" Completed Every 30,000 Miles

Vehicle: _____ Date: _____ Odometer: _____

Vendor Performing Service: _____ Report Attached: Yes or No

Check and Service (if necessary) the following:

Repairs/Action Needed

Service Level A

Replace Engine Air Cleaner Filter

Notes:

Service Level "D" Completed Every 60,000 Miles

Vehicle: _____ Date: _____ Odometer: _____

Vendor Performing Service: _____ Report Attached: Yes or No

Check and Service (if necessary) the following:

Repairs/Action Needed

Service Level A & C

Change Transaxle Fluid & Filter

Notes:

Service Level "E" Completed At 102,000 Miles

Vehicle: _____ Date: _____ Odometer: _____

Vendor Performing Service: _____ Report Attached: Yes or No

Check and Service (if necessary) the following:

Repairs/Action Needed

Service Level A & B

Flush & Replace Engine Coolant

Replace Ignition Cables

Replace Spark Plugs

Notes:

_____	_____

DAILY VAN INSPECTION REPORT

This form is to be filled out & signed AT THE END of your run. Leave it on the driver's seat in the vehicle so the subsequent driver can read, date & sign it. The subsequent driver will turn the form in with their paperwork that day. Be sure you fill out a new form at the end of each day.

Date _____ Driver _____

Van Number _____ Beginning Odometer _____

Item	OK	Defect	Comments/Nature of Defect
Fluid Leaks Under Van			
Lights-Interior			
Lights-Exterior (Head Lights/Turn Signals/Running Lights/Hazard)			
Horn			
Mirrors			
Wipers/Fluid			
Brakes-Service/Parking			
Steering			
Fans/Defroster			
Windows (clean/not chipped, etc)			
Tires-Tread/Condition/Air Pressure/Lug Nuts Tight			
Wheels/Rims			
Fire Extinguisher			
Emergency Road Kit			
Survival Kit (back pack)			
Cycle Wheel Chair Lift (CC4 Only)			

The condition of vehicle is satisfactory: Yes _____ No _____

If "No" explain _____ (if the condition requires the immediate attention of the Transportation Coordinator you must call)

Completing Driver's Signature/Date _____

Corrective action taken by Transportation Coordinator if applicable: _____

Subsequent Driver's Signature /Date _____

Driver Comments: _____

Company

SEMI ANNUAL VEHICLE INSPECTION

Vehicle # _____ Date: _____ Mileage: _____

Transportation Coordinator: _____

January:

_____ Exterior Condition (body and glass)
_____ Interior Condition
_____ Lighting Systems (interior/exterior)
_____ Air Conditioning/Heater Unit
_____ Tire Condition
_____ Wiper Blade Condition (replaced as needed throughout the year)

July:

_____ Exterior Condition (body and glass)
_____ Interior Condition
_____ Lighting Systems (interior/exterior)
_____ Air Conditioning/Heater Unit
_____ Tire Condition
_____ Wiper Blade Condition (replaced as needed throughout the year)

Comments:
