

CITY OF HAYSVILLE, KANSAS
SANITATION INSPECTION SHEET

Company Name: _____

Address: _____

City, State, Zip Code: _____

Telephone Number: _____

POLICE DEPARTMENT

Make of Vehicle: _____ State License No.: _____

Year of Vehicle: _____ Tagged Gross Vehicle Weight: _____

Brakes: _____ Parking Lights: _____

Headlights: _____ Horn: _____

Glass: _____ Load: Side _____ Rear _____ Front _____

If inspection is not satisfactory, please state reasons: _____

Chief of Police

INSPECTION

Is bed watertight? _____

Is mechanical portion of loader in proper working condition? _____

If vehicle is not satisfactory, state reasons: _____

City Inspector

Date: _____