**Section 443.ILLUSTRATION C Brake Inspection Report**

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|  | **Illinois Department****of Transportation** |  |  |
| **School Bus Brake Inspection Report** |
| Division of Traffic Safety3215 Executive Park Drive P.O. Box 19212Springfield, Illinois 62794-9212 |
|  |
| **District or Contractor:** |
|  |
| Name |  |
| Address |  |
| City/State |  | Zip |  | Telephone | ( ) |
| School Bus Unit Number |  | Chassis Make |  |
| Chassis Year |  | Chassis V.I.N. |  |
|  |
| Illinois law requires all school buses to be safety inspected at least once every six months or 10,000 miles, whichever occurs first. In addition, the Illinois Department of Transportation requires that a visual brake inspection be performed on every school bus operated in Illinois at least once a year or every 10,000 miles, whichever occurs first. |
|  |
| A completed School Bus Brake Inspection Report must be presented to the Certified Safety Tester each time a school bus is taken to an Official Testing Station for a safety inspection. |
|  |
| I attest that the entire brake system on the school bus listed above was visually inspected and found to be operating in accordance with the manufacturer's specifications or was repaired to perform in accordance with the manufacturer's specifications. The visual inspection of the brake system was |
| performed on |  |  by a qualified mechanic employed by |
|  | (date) |  |
|  | . The mileage on this school  |
| (business/school district where break inspection was completed) |  |  |
| bus was  | when the visual brake inspection was performed. |
|  | (mileage) |  |
|  |  |  |
| (name of authorized school district official or contractor) | (date) |
| *Please print or type* |  |
|  |
|  |  |
| (signature of authorized school district official or contractor) |
|  |
| (title) |
| TS 2258 (3/94) |