

**STV /SCHOOL BUS/ PUBLIC SERVICE VEHICLE
BRAKE INSPECTION REPORT**
R-380 Rev. 11-2010

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
COMMERCIAL VEHICLE SAFETY DIVISION

CARRIER NAME

CARRIER ADDRESS

VEHICLE MAKE	MODEL	UNIT NUMBER	YEAR
PLATE NUMBER	VIN	MILEAGE	

FRONT BRAKE MEASUREMENTS

CIRCLE ONE AIR BRAKES YES / NO	LEFT		RIGHT	
DRUM MAX DIAMETER OR ROTOR THICKNESS (OEM DISCARD VALUE)				
DRUM ACTUAL DIAMETER OR ROTOR THICKNESS (MEASURED VALUE)				
FRONT BRAKE LINING THICKNESS (RECORD IN 32NDS OF AN INCH)	INNER/UPPER	OUTER/LOWER	INNER/UPPER	OUTER/LOWER

REAR BRAKES MEASUREMENTS

	LEFT		RIGHT	
DRUM MAX DIAMETER OR ROTOR THICKNESS (OEM DISCARD VALUE)				
DRUM ACTUAL DIAMETER OR ROTOR THICKNESS (MEASURED VALUE)				
REAR BRAKE LINING THICKNESS (RECORD IN 32NDS OF AN INCH)	INNER/UPPER/PRIM.	OUTER/LOWER/SEC.	INNER/UPPER/PRIM.	OUTER/LOWER/SEC.

NAME OF REPAIR FACILITY	PHONE NUMBER
-------------------------	--------------

ADDRESS

MECHANIC'S NAME	MECHANIC'S SIGNATURE
-----------------	----------------------

I Certify under penalty of false statement that the information recorded on this report was true and accurate at the time of inspection. (CGS14-110 ref.53a157)	DATE
---	------

COMMENTS: