

**Top Gun Pressure Washing**  
**Equipment Inspection Form**

Date: \_\_\_\_\_ Print name of Inspector: \_\_\_\_\_ DIV: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

---

1) Date of last cleaning: \_\_\_\_\_ Service Tech: \_\_\_\_\_

2) Is the job being cleaned properly?      YES    NO

3) Are there any areas that were missed?      YES    NO

Explain: \_\_\_\_\_

4) Is the set up good for water collection?      YES    NO

Explain: \_\_\_\_\_

5) Were dikes, pumps, & booms used to collect water?    YES    NO

6) Were the windows and rails cleaned properly?    YES    NO

Explain: \_\_\_\_\_

7) Was the exterior cleaned properly?    Yes    NO

Explain: \_\_\_\_\_

8) Was the radiator cleaned properly?    YES    NO

Explain: \_\_\_\_\_

9) Was the engine compartment cleaned properly?    YES    NO

Explain: \_\_\_\_\_

10) Were the tracks cleaned properly?    YES    NO

Explain: \_\_\_\_\_

11) Were pictures taken?    YES    NO

***Important notes for management that need attention:***

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_