

## Department of Motor Vehicles STV / Public Service Vehicle Brake Inspection Report

Carrier Name					
Carrier Address					
Vehicle Make		Model		Year	
Plate Number		VIN #		Mileage	

Front Brake Measurements				
	L/F	R/F		
Rotor Minimum Thickness (OEM Discard Value)				
Rotor Actual Thickness (Measured Value)				
Brake Pad Measurements (record in 32nds of an inch)				
Rear Brakes Measurements				
			L/R	R/R
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)				

Name of Repair Facility		Phone #	
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: \_\_\_\_\_

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