

VIN \_\_\_\_\_

VEHICLE DESCRIPTION Stock/ID # \_\_\_\_\_ Odometer reading (km) \_\_\_\_\_

Year \_\_\_\_\_ Model \_\_\_\_\_ Colour \_\_\_\_\_ Engine Type \_\_\_\_\_ Transmission Type \_\_\_\_\_

Inspection Repair Order # \_\_\_\_\_ In-Service Date \_\_\_\_\_ Original Owners Literature  Complete  Missing: \_\_\_\_\_

## Mechanical Inspection

1. Road Test		
OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	Engine Start-Up Cold
<input type="checkbox"/>	<input type="checkbox"/>	Engine Warm-Up
<input type="checkbox"/>	<input type="checkbox"/>	Engine Start-Up Warm
<input type="checkbox"/>	<input type="checkbox"/>	Transaxle Shifting (Vehicle stopped)
<input type="checkbox"/>	<input type="checkbox"/>	Acceleration (Light, Moderate, Hard)
<input type="checkbox"/>	<input type="checkbox"/>	Transaxle Shifting (City, Highway)
<input type="checkbox"/>	<input type="checkbox"/>	Braking (Light, Moderate, Hard)
<input type="checkbox"/>	<input type="checkbox"/>	Driving Speed (Slow, Moderate, Highway)
<input type="checkbox"/>	<input type="checkbox"/>	Directional Stability (Alignment)
<input type="checkbox"/>	<input type="checkbox"/>	Noise/Vibration/Harshness
<input type="checkbox"/>	<input type="checkbox"/>	Cruise Control (Operation)
<input type="checkbox"/>	<input type="checkbox"/>	Rattles/Wind Noise
<input type="checkbox"/>	<input type="checkbox"/>	Accessory/Component Operation
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

2. Engine Compartment		
OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	VIN Stamp (Complete)
<input type="checkbox"/>	<input type="checkbox"/>	Engine
<input type="checkbox"/>	<input type="checkbox"/>	Transaxle
<input type="checkbox"/>	<input type="checkbox"/>	Electrical System
<input type="checkbox"/>	<input type="checkbox"/>	Cooling System
<input type="checkbox"/>	<input type="checkbox"/>	Cooling Fan
<input type="checkbox"/>	<input type="checkbox"/>	Steering System
<input type="checkbox"/>	<input type="checkbox"/>	Brake System (Master Cylinder, Lines)
<input type="checkbox"/>	<input type="checkbox"/>	Spark Plug Wires
<input type="checkbox"/>	<input type="checkbox"/>	Ignition Coil(s)
<input type="checkbox"/>	<input type="checkbox"/>	Fuel System (Injectors, Filters, Lines)
<input type="checkbox"/>	<input type="checkbox"/>	Air Conditioning System (Hoses, Refrigerant)
<input type="checkbox"/>	<input type="checkbox"/>	Air Inlet Systems/Filters
<input type="checkbox"/>	<input type="checkbox"/>	Passed Emission Test (If required)
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

3. Under Vehicle		
OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	Under Carriage Inspection
<input type="checkbox"/>	<input type="checkbox"/>	Radiator/Hoses/Cooling Lines
<input type="checkbox"/>	<input type="checkbox"/>	Fuel tank/Lines
<input type="checkbox"/>	<input type="checkbox"/>	Catalytic Converter/O2 Sensors
<input type="checkbox"/>	<input type="checkbox"/>	Exhaust Pipes/Muffler
<input type="checkbox"/>	<input type="checkbox"/>	Wheels
<input type="checkbox"/>	<input type="checkbox"/>	Tires (4/32" minimum tread depth remaining)
BRAKES		
<input type="checkbox"/>	<input type="checkbox"/>	Rotors, Pads, Shoes, Drums (4mm minimum lining)
<input type="checkbox"/>	<input type="checkbox"/>	Hydraulics (Calipers, Lines, Hoses)
DRIVELINE		
<input type="checkbox"/>	<input type="checkbox"/>	Engine
<input type="checkbox"/>	<input type="checkbox"/>	Clutch (If equipped)
<input type="checkbox"/>	<input type="checkbox"/>	Transaxle
<input type="checkbox"/>	<input type="checkbox"/>	CV Joints & Boots
<input type="checkbox"/>	<input type="checkbox"/>	Transfer Case (If equipped)
<input type="checkbox"/>	<input type="checkbox"/>	Rear Differential (If equipped)
SUSPENSION		
<input type="checkbox"/>	<input type="checkbox"/>	Control Arms/Link
<input type="checkbox"/>	<input type="checkbox"/>	Springs & Sway Bars & Bushings
<input type="checkbox"/>	<input type="checkbox"/>	Shock Absorbers
STEERING		
<input type="checkbox"/>	<input type="checkbox"/>	Rack & Pinion
<input type="checkbox"/>	<input type="checkbox"/>	Hydraulics (Hoses, Seals)
<input type="checkbox"/>	<input type="checkbox"/>	Linkage (Tie Rods/Ends)
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

4. Exterior		
OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	HeadLamps
<input type="checkbox"/>	<input type="checkbox"/>	Tail/Brake Lamps
<input type="checkbox"/>	<input type="checkbox"/>	Signal/Marker Lights
<input type="checkbox"/>	<input type="checkbox"/>	Wipers/Washers
<input type="checkbox"/>	<input type="checkbox"/>	Outside Mirrors
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

5. Interior		
OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	Gauges & Instrumentation
<input type="checkbox"/>	<input type="checkbox"/>	Primary Controls (Steering, Shift, Brakes)
<input type="checkbox"/>	<input type="checkbox"/>	Controls (WS Wiper, Washer, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Safety Restraints (SRS, Seatbelts, Child Seat Anchors)
<input type="checkbox"/>	<input type="checkbox"/>	Climate Control System
<input type="checkbox"/>	<input type="checkbox"/>	Fuel Door Control
<input type="checkbox"/>	<input type="checkbox"/>	Sound System (Radio/Tape/CD, Speakers, Antenna)
<input type="checkbox"/>	<input type="checkbox"/>	Windows
<input type="checkbox"/>	<input type="checkbox"/>	Seats
<input type="checkbox"/>	<input type="checkbox"/>	Doors/Door Locks (Keys, Lock, Child Locks)
<input type="checkbox"/>	<input type="checkbox"/>	Mirrors
<input type="checkbox"/>	<input type="checkbox"/>	Interior Lights
<input type="checkbox"/>	<input type="checkbox"/>	Keyless Entry & Alarm
<input type="checkbox"/>	<input type="checkbox"/>	Cargo Area (Spare Tire, Tools)
<input type="checkbox"/>	<input type="checkbox"/>	Sun/Moon Roof
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

# Appearance Inspection

## 6. Exterior

OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	Front Bumper
<input type="checkbox"/>	<input type="checkbox"/>	Grille
<input type="checkbox"/>	<input type="checkbox"/>	Hood
<input type="checkbox"/>	<input type="checkbox"/>	LF Fender
<input type="checkbox"/>	<input type="checkbox"/>	LF Wheel Well
<input type="checkbox"/>	<input type="checkbox"/>	LF Door
<input type="checkbox"/>	<input type="checkbox"/>	LR Door
<input type="checkbox"/>	<input type="checkbox"/>	LR Fender
<input type="checkbox"/>	<input type="checkbox"/>	LR Wheel Well
<input type="checkbox"/>	<input type="checkbox"/>	Trunk Lid, Tailgate
<input type="checkbox"/>	<input type="checkbox"/>	Spoiler (If equipped)
<input type="checkbox"/>	<input type="checkbox"/>	Rear Bumper
<input type="checkbox"/>	<input type="checkbox"/>	RR Fender
<input type="checkbox"/>	<input type="checkbox"/>	RR Door
<input type="checkbox"/>	<input type="checkbox"/>	RR Wheel Well
<input type="checkbox"/>	<input type="checkbox"/>	RF Door
<input type="checkbox"/>	<input type="checkbox"/>	RF Fender
<input type="checkbox"/>	<input type="checkbox"/>	RF Wheel Well
<input type="checkbox"/>	<input type="checkbox"/>	Roof
<input type="checkbox"/>	<input type="checkbox"/>	Windshield/Door/Rear Glass
<input type="checkbox"/>	<input type="checkbox"/>	Wheels/Wheel Covers
<input type="checkbox"/>	<input type="checkbox"/>	Other

## 7. Interior

OK	Needs Repair	Description/Condition
<input type="checkbox"/>	<input type="checkbox"/>	VIN Plate/Sticker
<input type="checkbox"/>	<input type="checkbox"/>	Instrument Panel
<input type="checkbox"/>	<input type="checkbox"/>	Dash Panel
<input type="checkbox"/>	<input type="checkbox"/>	Glove Box (Owners Literature)
<input type="checkbox"/>	<input type="checkbox"/>	Drivers Seat
<input type="checkbox"/>	<input type="checkbox"/>	Driver Door Panel
<input type="checkbox"/>	<input type="checkbox"/>	Passenger Seat
<input type="checkbox"/>	<input type="checkbox"/>	Passenger Door Panel
<input type="checkbox"/>	<input type="checkbox"/>	Front Carpet
<input type="checkbox"/>	<input type="checkbox"/>	Floor Mats
<input type="checkbox"/>	<input type="checkbox"/>	Rear Seat
<input type="checkbox"/>	<input type="checkbox"/>	LR Door Panel
<input type="checkbox"/>	<input type="checkbox"/>	LR Quarter Trim
<input type="checkbox"/>	<input type="checkbox"/>	RR Door Panel
<input type="checkbox"/>	<input type="checkbox"/>	RR Quarter Trim
<input type="checkbox"/>	<input type="checkbox"/>	Rear Carpet
<input type="checkbox"/>	<input type="checkbox"/>	Floor Mats
<input type="checkbox"/>	<input type="checkbox"/>	Headliner
<input type="checkbox"/>	<input type="checkbox"/>	Trunk/Cargo Area
<input type="checkbox"/>	<input type="checkbox"/>	Other

## 8. Servicing (Required for all CPO vehicles)

- Maintenance Services (Required)**
- Engine (Engine Oil & Filter Inspections/Change)
  - Mechanical Services (Within 3 months/6,000kms)
  - Outstanding Recalls
  - Diagnostic Code Check (Scan test, ECM, TCM, SRS, ABS)
  - Appearance (Exterior clean, wax Interior clean)

## 9. Quality Inspection

I certify that I have inspected this vehicle and made an evaluation against Hyundai Certification Standards

Technician's Signature \_\_\_\_\_

Date \_\_\_\_\_

## 10. Certification

I certify that this vehicle meets or exceeds all Hyundai Certification Standards

Dealership Name \_\_\_\_\_ Dealer Code \_\_\_\_\_

Used Vehicle Manager \_\_\_\_\_ Date \_\_\_\_\_