|  |  |
| --- | --- |
| **Team Member Name** | **Vehicle No:** |
| **If make not applicable put N/A. Note Orientation on each vehicle in the fleet must be completed** |
| **Team Member has been oriented with: (Note items in italics are vehicle specific – these items must have an “x” for each vehicle that is relevant to that Outlet’s fleet)** | **All Vans** | **Specific**  |
| **Renault** | **Toyota** | **LDV** | **Merc** | **Hyundai** | **Ford** |
| Unlocking/locking of vehicle and location of manual |  |  |  |  |  |  |  |
| Location/operation of handbrake/handbrake alarm and vehicle parking procedure |  |  |  |  |  |  |  |
| *Passenger door operation – automatic/manual, step, handrails* |  |  |  |  |  |  |
| *Fuel type for vehicle and fuel filler door/cap location* |  |  |  |  |  |  |
| *Operation of vehicle instrument panel gauges/lights* |  |  |  |  |  |  |
| *Location of vehicle Fire Extinguisher* |  |  |  |  |  |  |
| *Location of First Aid Kit, Utility Box and Esky* |  |  |  |  |  |  |
| *Location of emergency hammers and correct procedure for use* |  |  |  |  |  |  |
| *Auxiliary buttons/controls, including hazard lights, cooling and heating, horn* |  |  |  |  |  |  |
| Awareness of height/weight of vehicle and road weight limits |  |  |  |  |  |  |  |
| Rego, Vehicle ID |  |  |  |  |  |  |  |
| Correct protocol for answering/making calls with the two-way radio and mobile phone calls |  |  |  |  |  |  |  |
| *Procedure for engine checks* |  |  |  |  |  |  |
| ***Please Turn Over*** |
| **Team Member has been oriented with: (Note items in italics are vehicle specific)** | **All Vans** | **Specific**  |
| **Renault** | **Toyota** | **LDV** | **Merc** | **Hyundai** | **Ford** |
| Location of seatbelt extension strap and client information pack |  |  |  |  |  |  |  |
| Gearbox configuration/operation |  |  |  |  |  |  |  |
| Procedure for seat/seatbelt adjustment |  |  |  |  |  |  |  |
| *Anchor Points (installing child safety seats/harnesses, oxygen bottles)* |  |  |  |  |  |  |
| Correct operation of hoist, including manual operation and location of emergency cones |  |  |  |  |  |  |  |
| Wheelchair access door & restraint system |  |  |  |  |  |  |  |
| *Operation of rear seating* |  |  |  |  |  |  |
| Correct procedure for refuelling, including refuelling location and fuel card use |  |  |  |  |  |  |  |
| *Location of spare tyre & jack & securing vehicle* |  |  |  |  |  |  |
| Use of Storage Strap |  |  |  |  |  |  |  |
| Garage Storage & Equipment |  |  |  |  |  |  |  |
| ***Orientation Completed on abovementioned vehicles*** |
| **Team Members Signature** | **Orientator’s Name** | **Orientator’s Signature** | **Date** |