

Rental Vehicle Inspection Form – Post Rental

Primary Approved Driver Information					
Name: CSU ID:					
Was the WEX fuel card used? Yes No	Was the EZ-Pass T	ranspon	der used	? Yes 🗌	No 🗌
Vehicle Information					
Vehicle License Plate:	Space Number:				
Date of Pick Up:	Date of Return:				
Odometer Reading:	_ Gas Tank Reading:	1/4	1/2	3/4	F 🗌
Post-Rental Vehicle Inspection					
List and describe any vehicle damages including	g scratches, dents, and	missing p	oarts. Indi	icate the	
specific location of the damage on the outlines l	pelow.				



Vehicle Front	
Vehicle Back	
Vehicle Driver Side	
Vehicle Passenger Side	
Additional Comments	
Primary Approved Driver	
Printed Name:	CSU ID:
Signature:	Date:
Department of Parking & Transportation	n Services Representative
Printed Name:	CSU ID:
Signature:	Date:

Email: transportation@csuohio.edu or Call: (216) 687-2017