



# Vehicle Final Acceptance Form

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NMEDA QAP Label #: \_\_\_\_\_

Work Order/Job #: \_\_\_\_\_

Date: \_\_\_\_\_

**Customer Contact Information:**

**Vehicle Information:**

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

Phone No.: \_\_\_\_\_

Other Contact: \_\_\_\_\_

Make/Model: \_\_\_\_\_

Vehicle Year: \_\_\_\_\_

VIN: \_\_\_\_\_

**ACCEPTANCE ITEMS CHECKLIST**

(Reference QAP Rules section V, and Guidelines sections 2, 3, and 4)

<b>The following items have been completed and are part of the customer/vehicle file as necessary:</b>	Check One	
	OK	N/A*
Customer's contact information is provided		
A work order has been completed that includes the technician names responsible for the work		
Final vehicle and adaptive equipment Inspection has been completed with no open action items		
Final client fitting was completed (if applicable)		
Vehicle test drive was completed (if applicable)		
Customer and other users (as applicable) were provided instruction, in-service training, and maintenance instructions on all equipment installed		
A Make Inoperative form was completed and signed (if applicable)		
A driver rehabilitation specialists (DRS) assessment report, driver's license, or letter of customers experience operating the equipment (whichever are applicable) for the equipment installed is on file		
The vehicles GVWR and GAWR (front and rear) have not been exceeded		
The remaining Load Carrying Capacity of the modified vehicle is adequate for intended use		
Equipment owner's manuals, warranties (OEM and dealer), preventive maintenance schedule, and operating instructions have been provided		
The customer has been provided conditions of vehicle release		

\* N/A = Not Applicable

**Selling Dealer Approval (required for all vehicles):**

\_\_\_\_\_

(dealer sign)
Date

**Client Approvals (if client approvals are on another document this can be left blank):**

Customer Acceptance:

DRS or Third-Party Payer Acceptance:

\_\_\_\_\_

(client sign)
Date

\_\_\_\_\_

(DRS or 3<sup>rd</sup> party sign)
Date