



PRE-OPERATION CHECKLIST

For your safety and to ensure your warranty, please have a certified technician perform these inspections before you operate your vehicle.

- ___ HYDRAULIC BRAKE FLUID AT CORRECT LEVEL
- ___ FRONT AND REAR BRAKES ADJUSTED AND FUNCTIONING
- ___ FRONT AND REAR TIRES SET TO PROPER AIR PRESSURE
- ___ ALL CABLES ROUTED CORRECTLY AND FUNCTIONING
- ___ FUEL SYSTEM FLUSHED OUT (prevents carburetor problems)
- ___ OIL IN CRANKCASE AND TRANSMISSION AT PROPER LEVEL (change at 250 miles)
- ___ INTAKE AND EXHAUST VALVES ADJUSTED IF NEEDED
- ___ ELECTROLYTE IN BATTERY AT PROPER LEVEL
- ___ AIR FILTER CHECKED AND INSTALLED
- ___ IDLE SPEED ADJUSTED TO PROPER RPM
- ___ AIR FUEL MIXTURE ADJUSTED FOR BEST PERFORMANCE
- ___ HEADLIGHTS LOW AND HIGH BEAM OPERATING
- ___ REAR BRAKE LIGHT AND TAIL LIGHT OPERATING
- ___ ALL BLINKERS FUNCTIONING
- ___ EMERGENCY KILL SWITCH OPERATING
- ___ HORN FUNCTIONING PROPERLY
- ___ SPEEDOMETER, LIGHTS, AND GUAGES ON DASH WORKING
- ___ ALL FASTENERS- (nuts, bolts, screws)-TIGHTENED-(thread locker, such as Loctite[®], applied on high vibration areas ex:-exhaust manifold bolts)
- ___ CHAIN TENSION ADJUSTED-(MOTORCYCLES)
- ___ COOLANT LEVEL CHECKED-(water cooled engine)
- ___ TEST RIDE PERFORMED BY INSPECTOR

INSPECTION PERFORMED BY: _____ DATE: _____

MAKE AND MODEL OF VEHICLE: _____ VIN# _____

I UNDERSTAND THAT ALTHOUGH THIS VEHICLE HAS BEEN INSPECTED FOR SAFETY AND PROPER OPERATION, IT IS MY RESPONSIBILITY TO PERFORM THESE CHECKS EACH TIME BEFORE OPERATION BY OTHERS OR MYSELF.

CUSTOMER SIGNATURE: _____

PRINT: _____ DATE: _____

PLEASE RETURN THIS WITH YOUR WARRANTY CARD



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