

Rough Terrain Vehicle (RTV-X) – Product Delivery Inspection Receipt

RTV-X Model: _____ Serial Number: _____
 ROPS/CAB S/N: _____ Engine Serial Number: _____

DEALER INSPECTION
 Mark with "N/A" when Not applicable

<p>1. General Condition</p> <p><input type="checkbox"/> Machine is clean, free of scratches/dents</p> <p><input type="checkbox"/> Safety/Operational decals in place/legible/good condition</p> <p><input type="checkbox"/> All guards in place</p> <p><input type="checkbox"/> Seat belt, toolbox (if equipped)</p> <p><input type="checkbox"/> Tire Pressure (Record: LF RF LR RR)</p> <p><input type="checkbox"/> ROPS/Cab, roof, windshield, wiper assembly (if equipped)</p> <p><input type="checkbox"/> Check all grease/lube points for proper lubrication</p> <p><input type="checkbox"/> Wheel mounting bolts, nuts properly torqued</p> <p><input type="checkbox"/> Check for applicable Campaigns</p> <p>2. Fluids and Engine Accessory Checks (These checks must be conducted prior to starting the engine)</p> <p><input type="checkbox"/> Engine oil level and Fuel level within acceptable range</p> <p><input type="checkbox"/> Coolant/Anti-freeze level (Record degrees: _____)</p> <p><input type="checkbox"/> Transmission oil level within acceptable range</p> <p><input type="checkbox"/> Hydraulic oil level (under driver's seat) within acceptable range</p> <p><input type="checkbox"/> All filters installed and properly tightened</p> <p><input type="checkbox"/> All drain plugs/bleeder valves properly torqued</p> <p><input type="checkbox"/> Battery cables tight and battery fully charged</p> <p><input type="checkbox"/> Front axle fluid (4WD - if applicable)</p> <p><input type="checkbox"/> Radiator net/screen (if equipped)</p> <p><input type="checkbox"/> A/C belt tension (if equipped)</p> <p><input type="checkbox"/> Front knuckle case fluid (Brake oil - if applicable)</p> <p><input type="checkbox"/> Master cylinder brake fluid</p> <p>3. Engine and Startup Checks</p> <p><input type="checkbox"/> Glow plug operation (diesel engine only)</p> <p><input type="checkbox"/> Start safety switches</p> <p><input type="checkbox"/> Engine starting</p> <p><input type="checkbox"/> Engine RPM (Record: Idle _____ High _____)</p> <p><input type="checkbox"/> Parking brake operation (cable adjustment)</p>	<p>3. Engine and Startup Checks – continued</p> <p><input type="checkbox"/> All operator compartment controls</p> <p><input type="checkbox"/> Accelerator pedal operation and adjustment (cable adjustment)</p> <p><input type="checkbox"/> Electric cooling fans operational</p> <p>4. Gauges, Indicators, Lights</p> <p><input type="checkbox"/> Engine oil pressure gauge/indicator</p> <p><input type="checkbox"/> Coolant temperature gauge/indicator</p> <p><input type="checkbox"/> Hour meter (Record hours: _____)</p> <p><input type="checkbox"/> Speedometer (if equipped)</p> <p><input type="checkbox"/> Battery/charging light</p> <p><input type="checkbox"/> Fuel level gauge/indicator</p> <p><input type="checkbox"/> Air cleaner light (if equipped)</p> <p><input type="checkbox"/> Horn operation</p> <p><input type="checkbox"/> Back-up alarm operation (if equipped)</p> <p><input type="checkbox"/> All lights</p> <p><input type="checkbox"/> Meter panel lamps and operation (if equipped)</p> <p>5. Operation</p> <p><input type="checkbox"/> Bypass system operates to ease transmission shifting</p> <p><input type="checkbox"/> Free of oil, water, fuel leaks</p> <p><input type="checkbox"/> HST operation and performance</p> <p><input type="checkbox"/> Transmission (all speeds)</p> <p><input type="checkbox"/> Power steering/steering operation</p> <p><input type="checkbox"/> 4WD Operation (if equipped)</p> <p><input type="checkbox"/> A/C, heating operation (if equipped)</p> <p><input type="checkbox"/> All Safety Switch adjustment and operation</p> <p><input type="checkbox"/> Differential lock cable adjustment and operation</p> <p><input type="checkbox"/> Dump bed operation (manual or hydraulic)</p> <p>6. Attachments/Implements/Special Features</p> <p><input type="checkbox"/> All attachments properly secured/tightened/operated</p> <p><input type="checkbox"/> Expandable bed conversion (RTV-X1140 only)</p>
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DEALER-OWNER ORIENTATION

I have reviewed the following items with the customer and have answered all questions regarding same.

Kubota Owner's Warranty Information Guide and have received signed Receipt Card.

Owner's manual, operation, safety, and maintenance sections of manual given to customer.

Location, operation, and importance of all operator presence and safety switches. Reviewed ROPS importance and use.

Proper removal and installation of attachments/implements; storage of equipment.

Discussed Extended Warranty and KTAC Insurance options.

Dealer Signature: _____ Date: _____

CUSTOMER ACCEPTANCE

<p>I have received the following:</p> <p><input type="checkbox"/> Equipment orientation</p> <p><input type="checkbox"/> Copy of Product Delivery Inspection Receipt</p> <p><input type="checkbox"/> Operator's manual</p> <p><input type="checkbox"/> Kubota Owner's Warranty Information Guide/ Receipt Card</p>	<p>These items have been reviewed with me:</p> <p><input type="checkbox"/> Safe / Cold weather operation of equipment</p> <p><input type="checkbox"/> Proper maintenance (incl. spark arrester maintenance)</p> <p><input type="checkbox"/> Storage of equipment/attachments/implements</p> <p><input type="checkbox"/> Proper removal and installation of attachments/implements</p> <p><input type="checkbox"/> Options to purchase Extended Warranty and KTAC Insurance</p>
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Customer Signature: _____ Date: _____

NOTE: This document must be retained in Dealership files for future reference.