



Vehicle Inspection Checklist

For complete details, please refer to the Inspection Guidelines Section of the CPO BMW Vehicle Program Center Operations Manual

Enrollment & Vehicle History

STOCK NO.: _____

DATE: _____ CENTER NAME: _____ CENTER NO.: _____

CHASSIS NO.: _____ MILEAGE: _____ MODEL: _____ MODEL YEAR: _____

KEYS: MASTERS VALET **Mileage is to be substantiated through attaching a copy of the Key Reader**

SOURCE: BMW FS OFF-LEASE OTHER OFF-LEASE TRADE-IN AUCTION OTHER

SECTION 1: VEHICLE BACKGROUND & MAINTENANCE

CPO ENROLLMENT DATE: _____ **If NOT enrolled as CPO [Pending or Active], STOP!**

SERVICE ADVISOR NAME: _____ EMPLOYEE #: _____

REPAIR ORDER #: _____ DATE OPENED: _____ VEHICLE ORIGINAL IN-SERVICE DATE: _____

Service Interval Indicator (SIA) CURRENT SERVICE INDICATOR: _____ remaining miles

Condition Based Service (CBS) **CBS printout REQUIRED**

Item	Service is due in:	Comments:	Item	Service is due in:	Comments:
Engine Oil	_____ Date/Miles	_____	Microfilter	_____ Months	_____
Front Brakes	_____ Miles	_____	Brake Fluid	_____ Months	_____
Rear Brakes	_____ Miles	_____	Air Cleaner	_____ Date/Miles	_____
Vehicle Check	_____ Date/Miles	_____	Spark Plugs	_____ Months (applicable models only)	_____

VEHICLE MAINTENANCE HISTORY **BMW NA DCS Service History printout REQUIRED**

Engine Oil Services:		YES	Date of Service:	Brake Services:		YES	Date of Service:
First Service	<input type="checkbox"/>	_____	Front Pads	<input type="checkbox"/>	_____	_____	_____
Next or Annual	<input type="checkbox"/>	_____	Rear Pads	<input type="checkbox"/>	_____	_____	_____
Next or Annual	<input type="checkbox"/>	_____	Front Rotors	<input type="checkbox"/>	_____	_____	_____
Next or Annual	<input type="checkbox"/>	_____	Rear Rotors	<input type="checkbox"/>	_____	_____	_____
M-Model 1200 mile Running-In Check	<input type="checkbox"/>	_____	Fluid Flush	<input type="checkbox"/>	_____	_____	_____
To specification – not to exceed 2400 miles	<input type="checkbox"/>	_____					

Inspections (SIA Vehicles):		YES	Date of Service:	Other:		YES	Date of Service:
1	<input type="checkbox"/>	_____	Diesel Fuel Filter	<input type="checkbox"/>	_____	_____	_____
2	<input type="checkbox"/>	_____	Vehicle Check	<input type="checkbox"/>	_____	_____	_____

OPEN CAMPAIGNS? YES NO

NON-BMW PERFORMANCE MODIFICATIONS? YES NO

HAS CARFAX OR AUTOCHECK REPORT BEEN RUN? YES NO

Does CARFAX or AutoCheck report disqualify for CPO? YES NO

BODY REPAIR HISTORY: Repair Order(s): _____ Date _____ Mileage _____

Comments – include any known damage/repairs: _____

INSTRUMENT CLUSTER:

Has the instrument cluster been replaced? YES NO

If YES, does the current cluster reflect the **TOTAL** and **TRUE** mileage? YES NO



Vehicles NOT qualified for enrollment or sale as CPO:

- Inconsistent or incomplete maintenance history
- Non-BMW performance modifications
- Disqualifying CARFAX or AutoCheck report

SECTION 2: WHEEL ASSEMBLY

TIRE INSPECTION

TIRE TREAD DEPTH (minimum 3 mm when measured from the TOP of wear indicators) & SIDEWALL INSPECTION:

Location	Pressure	Inside	Center	Outside	OEM*	Brand, Type, Size, Speed Rating, Tread, & Condition:
Left Front	_____ psi	_____ mm	_____ mm	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Left Rear	_____ psi	_____ mm	_____ mm	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Spare	_____ psi	_____ mm	_____ mm	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Right Rear	_____ psi	_____ mm	_____ mm	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Right Front	_____ psi	_____ mm	_____ mm	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____

IS M-MOBILITY KIT TO STANDARD? Y N

WHEEL INSPECTION

Location	OEM*	Style, Condition & Torque:	Location:	OEM*	Style, Condition & Torque:
Left Front	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	Right Rear	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Left Rear	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	Right Front	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Spare	<input type="checkbox"/> Y <input type="checkbox"/> N	_____			

BRAKE INSPECTION

BRAKE PADS (minimum 5 mm of friction material) & ROTOR INSPECTION:

Location	Pad Measurement	OEM*	Rotor Condition	OEM*	Comments:
Left Front	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Left Rear	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Right Rear	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Right Front	_____ mm	<input type="checkbox"/> Y <input type="checkbox"/> N	_____	<input type="checkbox"/> Y <input type="checkbox"/> N	_____

* Replace mismatched and/or non-approved safety related components with Original Equipment Manufacturer (OEM) BMW parts. Refer to the Certified Pre-Owned Center Operations Manual, Section 2 - Vehicle Inspection Guidelines & Standards.

VIN _____

Body & Mechanical

SECTION 3: BODY CONDITION, FIT & FINISH

AREA	Meets BMW Guidelines & Standards	Comments	AREA	Meets BMW Guidelines & Standards	Comments
Front bumper	<input type="checkbox"/>	_____	GLASS AREA		
Park Distance Control	<input type="checkbox"/>	_____	Windshield	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Hood	<input type="checkbox"/>	_____	Door & side glass	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Core support	<input type="checkbox"/>	_____	Rear window	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Engine carrying rails	<input type="checkbox"/>	_____	Exterior mirrors	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Inner fenders	<input type="checkbox"/>	_____	Interior mirror	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Front fenders: left & right	<input type="checkbox"/>	_____	INTERIOR		
Doors: left/right, front/back	<input type="checkbox"/>	_____	Door weather seal	<input type="checkbox"/>	_____
A pillar: left/right	<input type="checkbox"/>	_____	Carpet/floor mats	<input type="checkbox"/>	_____
B pillar: left/right	<input type="checkbox"/>	_____	Wood/aluminum trim	<input type="checkbox"/>	_____
C pillar: left/right	<input type="checkbox"/>	_____	Cupholder(s)	<input type="checkbox"/>	_____
D pillar: left/right	<input type="checkbox"/>	_____	Interior light(s)	<input type="checkbox"/>	_____
Rocker/sill panels	<input type="checkbox"/>	_____	Glovebox	<input type="checkbox"/>	_____
Roof	<input type="checkbox"/>	_____	Seats	<input type="checkbox"/>	_____
Convertible top	<input type="checkbox"/>	_____	Headliner	<input type="checkbox"/>	_____
Check top storage compartment drains	<input type="checkbox"/>	_____	Books	<input type="checkbox"/>	_____
Sunroof	<input type="checkbox"/>	_____	Bluetooth Pass Key Card (E85 Z4 & E83 X3 models only)	<input type="checkbox"/>	_____
Check sunroof drains	<input type="checkbox"/>	_____	TRUNK		
Quarter panel: left/right	<input type="checkbox"/>	_____	Emergency release	<input type="checkbox"/>	_____
Antenna	<input type="checkbox"/>	_____	Tools	<input type="checkbox"/>	_____
Trunk lid	<input type="checkbox"/>	_____	Jack (model dependent)	<input type="checkbox"/>	_____
Hatch (model-dependent)	<input type="checkbox"/>	_____	Cargo net (model dependent)	<input type="checkbox"/>	_____
Tailgate (model-dependent)	<input type="checkbox"/>	_____	Cargo cover (model dependent)	<input type="checkbox"/>	_____
Rear license plate	<input type="checkbox"/>	_____	Cargo mat (model dependent)	<input type="checkbox"/>	_____
Rear taillight assemblies	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____	KEYS		
Rear bumper	<input type="checkbox"/>	_____	Master	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
Park Distance Control	<input type="checkbox"/>	_____	Valet (model dependent)	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
Spare wheelwell	<input type="checkbox"/>	_____	B PILLAR STICKERS:		
Rear floor pan	<input type="checkbox"/>	_____	VIN ID	<input type="checkbox"/>	_____
Inner trunk panels	<input type="checkbox"/>	_____	Placard	<input type="checkbox"/>	_____
Fuel-filler door	<input type="checkbox"/>	_____			
Mirror assembly (2)	<input type="checkbox"/>	_____			
Alignment of all panels	<input type="checkbox"/>	_____			

* Replace mismatched and/or non-approved safety related components with Original Equipment Manufacturer (OEM) BMW parts. Refer to the Certified Pre-Owned Center Operations Manual, Section 2 - Vehicle Inspection Guidelines & Standards.

SECTION 4: MECHANICAL

AREA	Meets BMW Guidelines & Standards	Comments	AREA	Meets BMW Guidelines & Standards	Comments
Headlight assembly	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____	Fluid levels:		
Fog light assembly	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____	Oil	<input type="checkbox"/>	_____
Headlight washer jets (optional)	<input type="checkbox"/>	_____	Brake	<input type="checkbox"/>	_____
Wiper blade, assembly & jets	<input type="checkbox"/>	_____	Power steering	<input type="checkbox"/>	_____
Door handle, hinge & lock	<input type="checkbox"/>	_____	Windshield washer	<input type="checkbox"/>	_____
Central locking functions	<input type="checkbox"/>	_____	Transmission	<input type="checkbox"/>	_____
Comfort Access	<input type="checkbox"/>	_____	Rear axle	<input type="checkbox"/>	_____
Alarm functions	<input type="checkbox"/>	_____	Diesel exhaust fluid (model dependent)	<input type="checkbox"/>	_____
Seat and headrest functions	<input type="checkbox"/>	_____	Coolant	<input type="checkbox"/>	_____
Seatbelt(s)	<input type="checkbox"/>	_____	Coolant Protection Level:		
Airbag(s)	<input type="checkbox"/>	_____	(circle one) -5F -10F -15F -20F -25F -30F -35F		
Airbags (Rear)	<input type="checkbox"/>	_____	SERVICE ACCEPTABLE GOOD		
Child locking functions	<input type="checkbox"/>	_____	Fluid leaks:		
Fuel-filler door locking	<input type="checkbox"/>	_____	(of components, lines, tanks & couplings)	<input type="checkbox"/>	_____
Trunk lock	<input type="checkbox"/>	_____	Transmission	<input type="checkbox"/>	_____
Rear wiper (optional)	<input type="checkbox"/>	_____	Transfer case	<input type="checkbox"/>	_____
Gas shocks	<input type="checkbox"/>	_____	Differential (front/rear)	<input type="checkbox"/>	_____
Suspension components	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____	CV joints & boots	<input type="checkbox"/>	_____
Front control arm bushings	<input type="checkbox"/>	_____	Gas	<input type="checkbox"/>	_____
Steering	<input type="checkbox"/>	_____	Engine oil	<input type="checkbox"/>	_____
Major component mounts	<input type="checkbox"/>	_____	Brake	<input type="checkbox"/>	_____
Exhaust system	<input type="checkbox"/>	_____	Power steering	<input type="checkbox"/>	_____
Belts	<input type="checkbox"/>	_____	Shocks & struts	<input type="checkbox"/>	_____
Belt tensioners	<input type="checkbox"/>	_____	Self-leveling (opt.)	<input type="checkbox"/>	_____
			Coolant	<input type="checkbox"/>	_____
			A/C	<input type="checkbox"/>	_____
			Hydraulic	<input type="checkbox"/>	_____
			Battery Voltage:		
			(circle one) 12.0 & Below 12.1 12.4 12.5 12.9		
			REPLACE IMMEDIATE RECHARGE FULLY CHARGED		

The minimum voltage for delivery of any Pre-Owned BMW to a customer is 12.50V

Diagnostic fault review: Corrected & Cleared

Vehicle Inspection Checklist

VIN

Road Test

Minimum road test time period: 20 uninterrupted minutes
Minimum road test distance: 5 continuous miles!

SECTION 5: STATIONARY REVIEW

Mileage before: _____ Mileage after: _____

Mileage (BEFORE and AFTER) is to be substantiated through attaching a copy of the Key Reader!

AREA	Meets BMW							Comments:
	Guidelines & Standards							
Driver's Seat Functions	Seatbelt	<input type="checkbox"/>						
	Front/back - up/down	<input type="checkbox"/>						
	Headrest	<input type="checkbox"/>						
	Lumbar (where applicable)	<input type="checkbox"/>						
Mirror Functions	Outside left/right	<input type="checkbox"/>						
	Interior – Gentex	<input type="checkbox"/>						
Navigation System	Functional <u>Test</u> and <u>Deliver</u> with a <u>working CD or DVD.</u>	<input type="checkbox"/>						
	Night vision with infrared	<input type="checkbox"/>						
Windshield	Rain sensor operation	<input type="checkbox"/>						
	Head-up display	<input type="checkbox"/>						
On-Board Computer Steering Wheel	Functional test	<input type="checkbox"/>						
	Adjustable	<input type="checkbox"/>						
	Airbag	<input type="checkbox"/>						
	Audio functions	<input type="checkbox"/>						
	Horn functions	<input type="checkbox"/>						
	Heat function	<input type="checkbox"/>						
	Shift Paddles	<input type="checkbox"/>						
	Wiper/washer	<input type="checkbox"/>						
	High beams	<input type="checkbox"/>						
	Computer	<input type="checkbox"/>						
Pedal Function	Gas	<input type="checkbox"/>						
	Brake	<input type="checkbox"/>						
Gearshift Function Parking Brake Function	Clutch (where applicable)	<input type="checkbox"/>						
		<input type="checkbox"/>						
HVAC Control	Heat: (circle one)	50F	55F	60F	65F	70F	75F	85F
			SERVICE		ACCEPTABLE		GOOD	
	A/C: (circle one)	40F	45F	50F	55F	60F	65F	70F
			GOOD		ACCEPTABLE		SERVICE	
	Fan	<input type="checkbox"/>						
	Temp range	<input type="checkbox"/>						
	Blower speeds	<input type="checkbox"/>						
	Blower: Defrost	<input type="checkbox"/>						
	Center	<input type="checkbox"/>						
	Lower	<input type="checkbox"/>						
Audio Function	Vent controls	<input type="checkbox"/>						
	Windshield defogger	<input type="checkbox"/>						
	Rear window defroster	<input type="checkbox"/>						
	Recirculating	<input type="checkbox"/>						
	Radio:	<input type="checkbox"/>						
	AM	<input type="checkbox"/>						
	FM	<input type="checkbox"/>						
	CD	<input type="checkbox"/>						
	Aux Input	<input type="checkbox"/>						
	Satellite Radio	<input type="checkbox"/>						
Speakers:	<input type="checkbox"/>							
Balance	<input type="checkbox"/>							
Fade	<input type="checkbox"/>							

VIN

Road Test

STATIONARY REVIEW (cont'd.)

AREA	Meets BMW		Comments:
	Guidelines & Standards		
Electrical	Vanity/visor	<input type="checkbox"/>	
	Map/interior	<input type="checkbox"/>	
	Headlights	<input type="checkbox"/>	
	Fog lights	<input type="checkbox"/>	
	Turn signals	<input type="checkbox"/>	
	Hazard flasher	<input type="checkbox"/>	
	Parking/side marker	<input type="checkbox"/>	
	Brake lights (3)	<input type="checkbox"/>	
	Back-up lights	<input type="checkbox"/>	
	License plate lights	<input type="checkbox"/>	
	Dash and console	<input type="checkbox"/>	
	Door lock	<input type="checkbox"/>	
	Seat heater(s)	<input type="checkbox"/>	
	Power window(s)	<input type="checkbox"/>	
	Cigarette lighter(s)	<input type="checkbox"/>	
	Power sunroof	<input type="checkbox"/>	
	Sunroof sunshade	<input type="checkbox"/>	
	Rear sunshade	<input type="checkbox"/>	
	Door sunshades	<input type="checkbox"/>	

SECTION 6: ROLLING REVIEW

Checklist to be completed following testing cycle, not while driving the vehicle.

AREA	Meets BMW		Comments:
	Guidelines & Standards		
Engine Performance	Cold/hot starting	<input type="checkbox"/>	
	Idle smoothness	<input type="checkbox"/>	
	Acceleration	<input type="checkbox"/>	
Transmission Shifting	Manual/Automatic/SMG/M-DCT	<input type="checkbox"/>	
Cruise Control	Function(s)	<input type="checkbox"/>	
Noise	Wind	<input type="checkbox"/>	
	Squeaks	<input type="checkbox"/>	
Vehicle Handling	Rattles	<input type="checkbox"/>	
	Vibration	<input type="checkbox"/>	
	Stability	<input type="checkbox"/>	
	Braking	<input type="checkbox"/>	
	ABS	<input type="checkbox"/>	
	DSC	<input type="checkbox"/>	
	HDC (model dependent)	<input type="checkbox"/>	
	Alignment	<input type="checkbox"/>	
	Operation	<input type="checkbox"/>	
	Operation	<input type="checkbox"/>	
Steering Wheel	Operation	<input type="checkbox"/>	
	Operation	<input type="checkbox"/>	
Instrument Gauges	Operation	<input type="checkbox"/>	
Rear View Camera	Operation	<input type="checkbox"/>	
Side & Top View Camera	Operation	<input type="checkbox"/>	
Other:		<input type="checkbox"/>	
		<input type="checkbox"/>	

SECTION 7: APPROVAL

Technician, Service Manager, and Pre-Owned Manager signatures certify that the vehicle has been carefully inspected and that apparent deficiencies have been corrected. This is a pre-owned vehicle; no claim is made, implied or otherwise, that this vehicle is in new condition.

TECHNICIAN NAME: _____	TECH NO.: _____	SIGNATURE: _____	DATE: _____
SERVICE MANAGER NAME: _____		SIGNATURE: _____	DATE: _____
PRE-OWNED MANAGER NAME: _____		SIGNATURE: _____	DATE: _____
CUSTOMER NAME: _____		SIGNATURE: _____	DATE: _____