

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 WALLET **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 DISPLAY: OR _____ 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	Miles	_____
Front Brakes	Miles	_____	Brake Fluid	Months	_____
Rear Brakes	Miles	_____	Air Cleaner	Date/Miles	_____
Vehicle Check	Date/Miles	_____	Coolant	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 to specification	<input type="checkbox"/>	_____	Fluid Flush	<input type="checkbox"/>	_____

Inspections (SIA Vehicles):
1 _____
2 _____

OPEN CAMPAIGNS? YES NO
NON-BMW PERFORMANCE MODIFICATIONS? YES NO
HAS CARFAX REPORT BEEN RUN? YES NO

Does CARFAX Report disqualify for CPO? YES NO

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

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 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.

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Body & Mechanical

SECTION 3: BODY CONDITION, FIT & FINISH

AREA	Meets BMW Guidelines & Standards	Comments
Front bumper	<input type="checkbox"/>	_____
Hood	<input type="checkbox"/>	_____
Core support	<input type="checkbox"/>	_____
Engine carrying rails	<input type="checkbox"/>	_____
Inner fenders	<input type="checkbox"/>	_____
Front fenders: left & right	<input type="checkbox"/>	_____
Doors: left/right, front/back	<input type="checkbox"/>	_____
A pillar: left/right	<input type="checkbox"/>	_____
B pillar: left/right	<input type="checkbox"/>	_____
C pillar: left/right	<input type="checkbox"/>	_____
D pillar: left/right	<input type="checkbox"/>	_____
Rocker/sill panels	<input type="checkbox"/>	_____
Roof	<input type="checkbox"/>	_____
Convertible top	<input type="checkbox"/>	_____
Sunroof	<input type="checkbox"/>	_____
Quarter panel: left/right	<input type="checkbox"/>	_____
Antenna	<input type="checkbox"/>	_____
Trunk lid	<input type="checkbox"/>	_____
Hatch (model-dependent)	<input type="checkbox"/>	_____
Tailgate (model-dependent)	<input type="checkbox"/>	_____
Rear license plate	<input type="checkbox"/>	_____
Rear taillight assemblies	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____
Rear bumper	<input type="checkbox"/>	_____
Spare wheelwell	<input type="checkbox"/>	_____
Rear floor pan	<input type="checkbox"/>	_____
Inner trunk panels	<input type="checkbox"/>	_____
Fuel-filler door	<input type="checkbox"/>	_____
Mirror assembly (2)	<input type="checkbox"/>	_____
Alignment of all panels	<input type="checkbox"/>	_____

AREA	Meets BMW Guidelines & Standards	Comments
GLASS AREA		
Windshield	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Door & side glass	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Rear window	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Exterior mirrors	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Interior mirror	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
INTERIOR		
Door weather seal	<input type="checkbox"/>	_____
Carpet/floor mats	<input type="checkbox"/>	_____
Wood/aluminum trim	<input type="checkbox"/>	_____
Cupholder(s)	<input type="checkbox"/>	_____
Interior light(s)	<input type="checkbox"/>	_____
Glovebox	<input type="checkbox"/>	_____
Seats	<input type="checkbox"/>	_____
Headliner	<input type="checkbox"/>	_____
Books	<input type="checkbox"/>	_____
Bluetooth Pass Key Card (E85 Z4 & E83 X3 models only)	<input type="checkbox"/>	_____
TRUNK		
Tools	<input type="checkbox"/>	_____
Jack (model dependent)	<input type="checkbox"/>	_____
Cargo net (model dependent)	<input type="checkbox"/>	_____
Cargo cover (model dependent)	<input type="checkbox"/>	_____
Cargo mat (model dependent)	<input type="checkbox"/>	_____
KEYS		
Master	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
Valet (model dependent)	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
Wallet (model dependent)	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
B PILLAR STICKERS:		
VIN ID	<input type="checkbox"/>	_____
Placard	<input type="checkbox"/>	_____

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SECTION 4: MECHANICAL

AREA	Meets BMW Guidelines & Standards	Comments
Headlight assembly	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____
Fog light assembly	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____
Headlight washer jets (optional)	<input type="checkbox"/>	_____
Wiper blade, assembly & jets	<input type="checkbox"/>	_____
Door handle, hinge & lock	<input type="checkbox"/>	_____
Central locking functions	<input type="checkbox"/>	_____
Alarm functions	<input type="checkbox"/>	_____
Seat and headrest functions	<input type="checkbox"/>	_____
Seatbelt(s)	<input type="checkbox"/>	_____
Airbag(s)	<input type="checkbox"/>	_____
Airbags (Rear) Deactivated	<input type="checkbox"/> Y <input type="checkbox"/> N	_____
Child locking functions	<input type="checkbox"/>	_____
Fuel-filler door locking	<input type="checkbox"/>	_____
Trunk lock	<input type="checkbox"/>	_____
Rear wiper (optional)	<input type="checkbox"/>	_____
Gas shocks	<input type="checkbox"/>	_____
Suspension components	OEM* <input type="checkbox"/> Y <input type="checkbox"/> N	_____
Front control arm bushings	<input type="checkbox"/>	_____
Steering	<input type="checkbox"/>	_____
Major component mounts	<input type="checkbox"/>	_____
Exhaust system	<input type="checkbox"/>	_____
Belts	<input type="checkbox"/>	_____
Belt tensioners	<input type="checkbox"/>	_____

AREA	Meets BMW Guidelines & Standards	Comments
Fluid levels:		
Oil	<input type="checkbox"/>	_____
Brake	<input type="checkbox"/>	_____
Power steering	<input type="checkbox"/>	_____
Windshield washer	<input type="checkbox"/>	_____
Transmission	<input type="checkbox"/>	_____
Rear axle	<input type="checkbox"/>	_____
Coolant	<input type="checkbox"/>	_____
Coolant Protection Level:		
(circle one)	-5F <input type="checkbox"/> -10F <input type="checkbox"/> -15F <input type="checkbox"/> -20F <input type="checkbox"/> -25F <input type="checkbox"/> -30F <input type="checkbox"/> -35F <input type="checkbox"/>	_____
	SERVICE ACCEPTABLE GOOD	
Fluid leaks: (of components, lines, tanks & couplings)		
Transmission	<input type="checkbox"/>	_____
Transfer case	<input type="checkbox"/>	_____
Differential (front/rear)	<input type="checkbox"/>	_____
CV joints & boots	<input type="checkbox"/>	_____
Gas	<input type="checkbox"/>	_____
Engine oil	<input type="checkbox"/>	_____
Brake	<input type="checkbox"/>	_____
Power steering	<input type="checkbox"/>	_____
Shocks & struts	<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)	11.7 <input type="checkbox"/> 12.0 <input type="checkbox"/> 12.3 <input type="checkbox"/> 12.4 <input type="checkbox"/> 12.5 <input type="checkbox"/> 12.7 <input type="checkbox"/>	_____
	REPLACE CHARGE GOOD	
Diagnostic fault review: Corrected <input type="checkbox"/> & Cleared <input type="checkbox"/>		

Attach a copy of the diagnostic printout! (Please continue on back)

Vehicle Inspection Checklist

VIN

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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!

	Meets BMW Guidelines & Standards	Comments:
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"/>	_____
	Heads-up display <input type="checkbox"/>	_____
	On-Board Computer Functional test <input type="checkbox"/>	_____
Steering Wheel	Adjustable <input type="checkbox"/>	_____
	Airbag <input type="checkbox"/>	_____
	Audio functions <input type="checkbox"/>	_____
	Horn functions <input type="checkbox"/>	_____
	Heat function <input type="checkbox"/>	_____
Stalk controls	Wiper/washer <input type="checkbox"/>	_____
	High beams <input type="checkbox"/>	_____
	Computer <input type="checkbox"/>	_____
Pedal Function	Gas <input type="checkbox"/>	_____
	Brake <input type="checkbox"/>	_____
	Clutch (where applicable) <input type="checkbox"/>	_____
Gearshift Function	<input type="checkbox"/>	_____
	<input type="checkbox"/>	_____
Parking Brake Function	<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"/>	_____
	Vent controls <input type="checkbox"/>	_____
Windshield defogger <input type="checkbox"/>	_____	
Rear window defroster <input type="checkbox"/>	_____	
Recirculating <input type="checkbox"/>	_____	
Audio Function	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"/>	_____

