



# 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 #: \_\_\_\_\_

DATE: \_\_\_\_\_ CENTER NAME: \_\_\_\_\_ CENTER #: \_\_\_\_\_

CHASSIS NO.: \_\_\_\_\_ KEY READ MILEAGE: \_\_\_\_\_ MODEL: \_\_\_\_\_ MODEL YEAR: \_\_\_\_\_

### 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: \_\_\_\_\_ ORIGINAL IN-SERVICE DATE: \_\_\_\_\_

**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, incl. i3 Rex, i8:**

**YES**  **Date of Service:** \_\_\_\_\_

**Brake Services:**

**YES**

**Date of Service:** \_\_\_\_\_

- First Service  \_\_\_\_\_
- Next or Annual  \_\_\_\_\_
- Next or Annual  \_\_\_\_\_
- Next or Annual  \_\_\_\_\_
- M-Model 1200 mile Running-In Check  \_\_\_\_\_
- Not to exceed the initial 2400 miles  \_\_\_\_\_

- Front Pads  \_\_\_\_\_
- Rear Pads  \_\_\_\_\_
- Front Rotors  \_\_\_\_\_
- Rear Rotors  \_\_\_\_\_
- Fluid Flush  \_\_\_\_\_

**Other:**

- Diesel Fuel Filter  \_\_\_\_\_
- Vehicle Check  \_\_\_\_\_
- Belt(s) Replaced  \_\_\_\_\_
- Wipers/Inserts  \_\_\_\_\_
- Filters (Cabin/Engine)  \_\_\_\_\_
- Spark Plugs  \_\_\_\_\_

**OPEN CAMPAIGNS/STOP SALE?**

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 \_\_\_\_\_ Center \_\_\_\_\_ 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	Brand, Type, Size, Speed Rating & Condition:
Left Front	_____ psi	_____ mm	_____ mm	_____ mm	_____
Left Rear	_____ psi	_____ mm	_____ mm	_____ mm	_____
Spare	_____ psi	_____ mm	_____ mm	_____ mm	_____
Right Rear	_____ psi	_____ mm	_____ mm	_____ mm	_____
Right Front	_____ psi	_____ mm	_____ mm	_____ mm	_____

**IS M-MOBILITY KIT TO STANDARD?**  Y  N

#### WHEEL INSPECTION

**Location** **Style, Condition & Torque:**

Left Front \_\_\_\_\_  
 Left Rear \_\_\_\_\_  
 Spare \_\_\_\_\_

**Location:** **Style, Condition & Torque:**

Right Front \_\_\_\_\_  
 Right Rear \_\_\_\_\_

#### BRAKE INSPECTION

**BRAKE PADS** (minimum 5 mm of friction material)

**& ROTOR INSPECTION:**

Location	Pad Measurement	Rotor Condition	Comments:
Left Front	_____ mm	_____	_____
Left Rear	_____ mm	_____	_____
Right Rear	_____ mm	_____	_____
Right Front	_____ mm	_____	_____

\* Replace mismatched and/or non-approved components with Original Equipment Manufacturer (OEM) BMW Parts. Refer to the Certified Pre-Owned Center Operations Manual, Section 3 - CPO Inspection Guidelines.

## 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"/>	_____	<b>GLASS AREA</b>		
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"/>	_____	<b>INTERIOR</b>		
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		_____	Books	<input type="checkbox"/>	_____
compartment drains	<input type="checkbox"/>	_____	<b>TRUNK</b>		
Sunroof	<input type="checkbox"/>	_____	Emergency release	<input type="checkbox"/>	_____
Check sunroof drains	<input type="checkbox"/>	_____	Tools	<input type="checkbox"/>	_____
Quarter panel: left/right	<input type="checkbox"/>	_____	Cargo net (model dependent)	<input type="checkbox"/>	_____
Trunk lid	<input type="checkbox"/>	_____	Cargo cover (model dependent)	<input type="checkbox"/>	_____
Hatch (model-dependent)	<input type="checkbox"/>	_____	Cargo mat (model dependent)	<input type="checkbox"/>	_____
Tailgate (model-dependent)	<input type="checkbox"/>	_____	<b>KEYS</b>		
Rear license plate	<input type="checkbox"/>	_____	Master	0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/>	_____
Rear taillight assemblies	<input type="checkbox"/>	_____	<b>B PILLAR STICKERS:</b>		
Rear bumper	<input type="checkbox"/>	_____	VIN ID	<input type="checkbox"/>	_____
Park Distance Control	<input type="checkbox"/>	_____	Placard	<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"/>	_____			

\* Replace mismatched and/or non-approved components with Original Equipment Manufacturer (OEM) BMW Parts. Refer to the Certified Pre-Owned Center Operations Manual, Section 3 - CPO Inspection Guidelines.

### SECTION 4: MECHANICAL

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

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 

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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 AFTER ) is to be substantiated through attaching a copy of the Key Reader!**

		<b>Meets BMW</b>		
	<b>AREA</b>	<b>Guidelines &amp; Standards</b>	<b>Comments:</b>	
<b>Driver's Seat Functions</b>	Seatbelt	<input type="checkbox"/>	_____	
	Front/back - up/down	<input type="checkbox"/>	_____	
	Headrest	<input type="checkbox"/>	_____	
	Lumbar (where applicable)	<input type="checkbox"/>	_____	
<b>Mirror Functions</b>	Outside left/right	<input type="checkbox"/>	_____	
	Interior – Dimming/Compass	<input type="checkbox"/>	_____	
<b>Windshield</b>	Rain sensor operation	<input type="checkbox"/>	_____	
	Head-up display	<input type="checkbox"/>	_____	
<b>On-Board Computer</b>	Functional test	<input type="checkbox"/>	_____	
	<b>Steering Wheel</b>	Adjustable	<input type="checkbox"/>	_____
Airbag		<input type="checkbox"/>	_____	
Audio functions/Thumbwheel		<input type="checkbox"/>	_____	
Horn functions		<input type="checkbox"/>	_____	
Heat function		<input type="checkbox"/>	_____	
Shift Paddles		<input type="checkbox"/>	_____	
<b>Stalk controls</b>		Wiper/washer	<input type="checkbox"/>	_____
	High beams	<input type="checkbox"/>	_____	
	Trip Computer/Info Display	<input type="checkbox"/>	_____	
<b>Pedal Function</b>	Gas	<input type="checkbox"/>	_____	
	Brake	<input type="checkbox"/>	_____	
	Clutch (where applicable)	<input type="checkbox"/>	_____	
<b>Gearshift Function</b>		<input type="checkbox"/>	_____	
	<b>Parking Brake Function</b>	<input type="checkbox"/>	_____	
<b>HVAC Control</b>	<b>Heat:</b>	50F	55F	
	<b>(circle one)</b>	60F	65F	
		70F	75F	
		85F		
		SERVICE	ACCEPTABLE	GOOD
	<b>A/C:</b>	40F	45F	50F
	<b>(circle one)</b>	55F	60F	65F
		70F		
		GOOD	ACCEPTABLE	SERVICE
	Fan	<input type="checkbox"/>	_____	
	Temp range/Sync	<input type="checkbox"/>	_____	
	Blower speeds	<input type="checkbox"/>	_____	
	Blower:	<input type="checkbox"/>	_____	
	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"/>	_____		
<b>Navigation System</b>	Functional <u>Test</u>	<input type="checkbox"/>	_____	
	Night vision with infrared	<input type="checkbox"/>	_____	
<b>iDrive Controller</b>	Check operation of all function keys	<input type="checkbox"/>	_____	
	iDrive Touch function	<input type="checkbox"/>	_____	
	Delete all customer data	<input type="checkbox"/>	_____	
<b>Audio Function</b>	<b>Radio:</b>	<input type="checkbox"/>	_____	
	AM/FM	<input type="checkbox"/>	_____	
	CD/Aux	<input type="checkbox"/>	_____	
	Satellite Radio	<input type="checkbox"/>	_____	
	<b>Speakers:</b>	<input type="checkbox"/>	_____	
	Balance/Fade	<input type="checkbox"/>	_____	

VIN 

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## Road Test

### STATIONARY REVIEW (cont'd.)

		Meets BMW	
	AREA	Guidelines & Standards	Comments:
<b>Electrical</b>	Vanity/visor	<input type="checkbox"/>	_____
	Map/interior	<input type="checkbox"/>	_____
	Headlights	<input type="checkbox"/>	_____
	Fog/Cornering 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: iBRAND AND PLUG-IN HYBRID VEHICLES

		Meets BMW	
	AREA	Guidelines & Standards	Comments:
	Check high voltage socket/connections/cables	<input type="checkbox"/>	_____
	Check AC charging function and SOC (State of Charge) after completion	<input type="checkbox"/>	_____
	High voltage battery must be 100% charged for CPO and at time of customer delivery	<input type="checkbox"/>	_____
	Check all function keys for iDrive	<input type="checkbox"/>	_____

### SECTION 7: ROLLING REVIEW

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

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

### SECTION 8: 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: _____