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| **TRUCK BODY REPAIR** **AUDITED STANDARDS** |

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| **Company Information** |
| Trading Name |  |
| Postcode |  |
| Parent Co (if applicable) |  |
| Name of Proprietor / Director |  |
| Bodyshop Manager |  |

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| Franchises (if applicable) |  |
| Opening Hours  | mon–fri | sat | sun |
| Types of Vehicles Repaired | Truck |  | LCV (Vans) |  | 4 x 4 vehicles |  |

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| **Personnel** | **Skilled** | **Semi-Skilled** | **App/Trainees** | **Total** |
| Paint |  |  |  |  |
| Body |  |  |  |  |
| Mechanical |  |  |  |  |
| Parts |  |  |  |  |
| Recovery/Del. |  |  |  |  |
| Estimators |  |  |  |  |
| Reception |  |  |  |  |
| Accounts/Admin |  |  |  |  |
| Others |  |  |  |  |
| **TOTALS** |  |  |  |  |

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| **PARKING/STORAGE** | **bays/spaces** | **production bays** | **bays/spaces** |
| Designated Customer Parking |  | Mechanical Bays |  |
| Secure Damaged Vehicle Storage |  | Panel Bays |  |
| Outside Parking |  | Paint Preparation Bays |  |
| Designated Disabled Parking Bays |  | Spray Booths/Low Bake |  |
|  |  | Wash |  |
| total bays |  | total bays |  |

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| **OPERATING STANDARDS** |
| **1** | **insurances, licences & legislation**  | **status, yes, no or n/a** | **expiry date** |
| 1 | Petroleum & Solvents (safe storage system) |  |  |
| 2 | Air Bag Storage (safe system of storage) |  |  |
| 3 | EPA Registered or compliant Systems |  |  |
| 4 | Health & Safety Policy & Risk Assessment |  |  |
| 5 | COSHH Assessment  |  |  |
| 6 | LEV Certificates (paint ovens & dust extract) |  |  |
| 7 | Breathing Air Quality Monitoring (BS 4275) |  |  |
| 8 | Disposal of Waste Regs & Transfer Notes Filed |  |  |
| 9 | Registered as “hazardous waste” producer |  |  |
| 10 | Accident Record Book |  |  |
| 11 | Motor Trade Insurance |  |  |
| 12 | Employers/Public Liability Insurance |  |  |
| 13 | VBRA Code of Practice & Warranty |  |  |
| 14 | Registered for VBRA Audited standardDate of Audit |  |  |

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| **2** | **facilities** | **please tick** |
| 1 | is the exterior of the premises generally clean and well maintained? |  |
| 2 | are external signs in good condition and current? |  |
| 3 | are customer directional signs in place & effective? |  |
| 4 | is there an adequate reception area and toilet facility (clean and well maintained) |  |
| 5 | are the repair facilities adequate for the work being carried out? |  |
| 6 | is the overall standard of housekeeping and maintenance of a good standard? |  |

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| **3** | **personnel skills**  | **please tick** |
| 1 | is the bodyshop manager/supervisor trained to a recognised national standard or has gained the equivalent skills by experience or is a member of a professional institute? |  |
| 2 | has a skills analysis been carried out for all personnel? |  |
| 3 | is there a planned training programme in place? |  |
| 4 | have all staff been made formally aware of their h&s responsibilities? |  |
| 5 | are operatives qualified to bs4872 mig/MAG & bs1140 spot welding standards?mag test in 1mm, 2mm & 6mm (with independent test of welds) all welders |  |
| 6 | are operatives trained in tig welding for stainless steel or aluminium welding as applicable?  |  |
| 7 | have technicians knowledge of ultra high strength steels (boron awareness)? |  |
| 8 | proof of Current competence as senior panel technician, minimum of two. (Renewable every three years or cpd) |  |
| 9 | proof of current competence as senior paint technician, minimum of two(renewable every three years or cpd) |  |
| 10 | proof of current competence as senior met technician, minimum of two(renewable every three years or cpd) |  |
| 11 | proof of current competence in adas technology, minimum of twoqualified to IMI AOM230 |  |
| 12 | proof of current competence as hgv jig technician, minimum of twoqualified by bremco or similar. |  |

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| **A** | **BODY & CHASSIS ALIGNMENT,** |  | **comments** |
| 1. | Chassis Alignment Jigmake; Model; |  |  |
| 1a | Cab Jig:make: Model: |  |  |
| 2 | pulling/jacking system |  |  |
| 3 | four wheel alignment system (with print out)in house? yes / no. subcontract yes / noMake: Model: |  |  |
| 4 | head lamp alignment equipment |  |  |
| 5 | ADAS Equipment, Make; YES / NO or Subcontract |  |  |

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| **B** | **PAINT** |  | **comments** |
| 1 | Compliant oven, operating on negative pressure, with auto cut out? |  |  |
| 1a | Is the “mist clearance time” displayed on all ovens?  |  |  |
| 2 | Current LEV certificates for paint ovens (every 14 months) coshh |  |  |
| 3 | HVLP or compliant spray guns to be used? |  |  |
| 4 | Paint mixing system located in a ventilated room, with adequate ventilation for removal of fumes |  |  |
| 5 | Spray gun cleaning equipment to meet standards for solvent & water based? |  |  |
| 6 | Zinc plating material and methods |  |  |
| 7 | Paint thickness gauge **(recommended)** |  |  |
| 8 | Goggles and gloves available |  |  |
| 9 | Full face breathing equipment (in continuous use)  |  |  |
| 10 | Face masks (dust or solvent) is face fit carried out? |  |  |
| 11 | Disposable overalls |  |  |

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| **C** | **WELDING equipment** |  | **comments** |
| 1 | Resistance (spot) welding equipmentmake: model:does specification meet uhss steels welding specifications? \* |  |  |
| 2 | TIG weldermake: model:**not mandatory** |  |  |
| 3 | MIG welding equipmentmake: model: |  |  |
| 4 | MIG brazing equipmentmake: model:not mandatory |  |  |
| 5 | Aluminium welding equipmentmake: model: |  |  |
| 5a | Aluminium repair area (segregated area)**not mandatory unless manufacturer approved** |  |  |
| 5b | Aluminium equipment to industry standards**for use in segregated area as industry or manufacturer standard** |  |  |
| 6 | Oxy-acetylene set (pipes & hoses in good condition)check dates on gauges and arrestors (end dates) |  |  |
| 6.A | Induction Heater |  |  |
| 7 | Welding screens |  |  |
| 8 | Welding blankets |  |  |
| 9 | Spot weld remover (uhss special drills\*) |  |  |
| 10 | Welding fume extraction (mobile unit, adequate ventilation or air fed masks) |  |  |
| 11 | Goggles/visors available  |  |  |
| 12 | Protective gloves |  |  |

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| **d** | **general health & safety items & equipment mandatory** |  | **comments** |
| 1 | Are all HSAW signs displayed? |  |  |
| 2 | Dust extraction system (fixed or mobile)  |  |  |
| 2a | LEV certificate for **installed** dust extraction system  |  |  |
| 3 | Is health surveillance carried out? including biological testing |  |  |
| 3a | Noise level assessment? (risk assessment)  |  |  |
| 4 | Hearing protection available and in constant use? coshh 2004 |  |  |
| 5 | Overalls (with laundry regime) |  |  |
| 6 | Goggles |  |  |
| 7 | Gloves |  |  |
| 8 | FACE MASKS is face fit testing carried out? |  |  |
| 9 | Fire extinguishers |  |  |
| 10 | Eye wash facility (adjacent to paint mixing room) |  |  |
| 11 | First aid box |  |  |
| 12 | Trained first aid person (list with date of training) |  |  |
| 13 | PAT testing (portable appliance testing – 12 month)annual test certificate  |  |  |

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| **E** | **general tooling & equipment** |  | **comments** |
| 1 | Panel cutting saw |  |  |
| 2 | Air conditioning equipment: R134 Gas make: model:R1234YF Gas, Make Model |  |  |
| 3 | Drills, pillar & stand types & hand held |  |  |
| 4 | Bench grinder |  |  |
| 4A | Grinding wheel regulations poster on display |  |  |
| 4B | Operative trained to mount grinding wheels |  |  |
| 5 | Orbital sanders (with dust extraction)  |  |  |
| 6 | Angle grinders |  |  |
| 7 | Adhesive and sealing guns |  |  |
| 8 | Compressor with air dryer in system & water traps |  |  |
| 9 | Register for filter replacement cycle for compressed air system |  |  |
| 10 | Battery charger |  |  |
| 11 | Fuel retriever (**refer to risk assessment**) |  |  |

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| **F** | **CORROSION PROTECTION** | **YES / NO** |
| 1 | Wax injection system |  |
| 2 | Anti-gravel application system |  |

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| **G** | **SMART REPAIR SYSTEMS** | **YES / NO / SUBCON** |
| 1 | Screen/glass repair system |  |
| 2 | Plastic repairs (i.e. bumpers etc.) |  |
| 3 | Paintless dent repair |  |
| 4 | Soft plastic & trim repair |  |
| 5 | Bonding systems |  |

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| **BODYSHOP CATEGORY** | **INSPECTION DATE** | **APPROVED YES / NO** |
| Truck Body Repair Standard |  |  |
| **FIELD EXECUTIVE****Name:** | **Signature:** | **Date:** |