

Bobcat, Bulldozer, Excavator, Backhoes, Grapple, Haul Truck, Motor Grader, Pans (Scraper), Payloader, Skid Steer, Street Sweeper, Tractor, Boom Truck Cranes

MANDATORY INFORMATION

<u>INSPECTION TYPE</u>		<u>OWNED/LEASED</u>		<u>Operator/Inspector</u>		<u>Date</u>
<input type="checkbox"/> Pre-Entry	<input type="checkbox"/> Owned					
<input type="checkbox"/> Pre-Operational	<input type="checkbox"/> Leased					
<u>Make</u> _____	<u>Unit No.</u> _____	<u>FUEL TYPE</u>	<u>QUANTITY</u>	Additional Operators _____ _____ _____ _____		
<u>Model</u> _____	<u>Hr. Meter Reading</u> _____	<input type="checkbox"/> Gasoline	<input type="checkbox"/> FULL			
<u>Equipment No.</u> _____	<u>Location</u> _____	<input type="checkbox"/> Diesel	<input type="checkbox"/> HALF			
		<input type="checkbox"/> Other	<input type="checkbox"/> EMPTY			

**CHECK EACH BOX THAT APPLIES**

	<u>INSPECTION POINTS</u>	<u>OK</u>	<u>NOT OK</u>	<u>N/A</u>		<u>INSPECTION POINTS</u>	<u>OK</u>	<u>NOT OK</u>	<u>N/A</u>
<b>BEFORE STARTING</b>	1. Barricade Arms (Grappals)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>AFTER STARTING</b>	30. Air System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	2. Battery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		31. Back-Up Alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	3. Bells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		32. Operating Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	4. Boarding Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		33. Cylinders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	5. Body, Cab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		34. Gauges/Instruments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	6. Boom & Slick (Backhoes)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		35. Horn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	7. Bushing/Pin/Grease Fittings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		36. Hoses, Connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	8. Chains, Drive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		37. Outriggers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	9. Control Markings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		38. Parking Brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	10. Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		39. Pins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Exhaust System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	40. Steering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
12. Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	41. System Brakes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
13. Fuel & Fluids	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
14. Hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
15. Housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
16. Life Vest and/or Life Ring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>ATTACHMENTS</b>	42. Hooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17. Lights-Head/Brake/Tail/Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		43. Inspection Plates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Load Chart/Placard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		44. Load Charts/Placard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Mirrors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		45. Operators Manuals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		46. Outriggers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Operators Manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		47. Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Permits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		48. All Leaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Connections / Quick Couplers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		49. Are all fittings accepting grease? (if not, contact your Supervisor right away)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Physical Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		50. Has machine been greased today?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. Rail/U-Carriage/Drive Train	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
26. Safety Guards, Hand Rails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
27. Seat Belts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
28. Tires/Tracks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
29. Windshield: Window/Wipers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

Comments (refer to item number):

- Equipment is "OK" to operate     
  It is "OK" to operate with the above defects; or     
  This equipment is removed from service & tagged-out until repairs are completed.

Operator Signature \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

White Copy - Office      Yellow Copy - Supervisor