DAILY CHECKLIST FOR EQUIPMENT

Inspector's Name:

Operator's Name:

Make	Model	Jobsite	Week Ending

S = Satisfactory U = Unsatisfactory N/A = Not Applicable

Check Item	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Engine Oil						
Lubricant						
Instruments						
Cooling System						
Air System						
Hydraulic System						
*Operating Controls						
Glass, Mirrors						
*Brakes (service and park)						
*Steering System						
Tires						
*Safety Devices						
Lights & Reflectors						
*Back Up Alarm (BUA						
*Horn						
Windshield Wipers						
Fire Extinguisher						
Manufacturer's Labels						

These items are to be checked prior to shift before operating this piece of equipment. Report ALL items in need of repair to your supervisor so that proper maintenance can be performed. Turn in check sheet to your supervisor at the end of each week.
(Items with a *, do not operate without the supervisors permission.)

Repairs Needed	Date Reported	Date Repaired