

(Print Name)

(Sign Name)

Inspector's/Operator's Name: _____

Make	Model	Jobsite	Week Ending:			
Hours on the Forklift Meter						
ITEMS CHECKED	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
TIRES						
Tight Wheel Nuts						
Proper tire Pressure						
Tires in Good Condition						
FORKS						
No Cracks or Damage						
Centered on Carriage						
Locking Pins Working						
CYLINDERS/ HYDRAULIC LINES						
Fluid at Proper Level						
Hydraulic Lines & Hoses Okay						
No damaged or Leaking Cylinders						
Cylinder Mountains Secure						
ENGINE						
Air Filter Okay						
Oil Filter Okay						
Proper Oil Level						
Transmission Fluid Okay						
Coolant Level Okay						
No Visible Leaks Under Lift						
HORNS						
Backup Signal Sounds						
Horn Works						
BRAKES						
Parking Brakes Stops Lift From Moving						
Lift Brakes Work Properly						
Brakes Don't Lock						
STEERING						
Steering Wheel Turns While Stopped						
Steering Wheel Turns Smoothly while Moving						
GAUGES/INSTRUMENTS						
All Gauges Work Properly						
All Instruments Work Properly						
Horizontal Indicator Works Properly						
Inspection Plate is Readable						
These Items are to be checked each morning before operating the forklift. Report ALL items in need of repair to your supervisor so that proper maintenance can be performed. Turn in checklist to your supervisor at the end of each week.						
Repairs Needed				Date Reported	Date Repaired	

