

<b><u>OPERATORS NAME</u></b>							
<b><u>ID NUMBER</u></b>							
Month/Date							
<b><u>Brakes</u></b>							
Foot Inching							
Parking							
Reversing Pedal							
Seat Switch							
Kill Switch							
Horn							
Tow Hooks							
Tow Hook Hitch							
Seat Belts							
<b><u>LIGHTS:</u></b>							
Head Lights							
Flashing							
Cradle							
Fire Extinguisher							
Steering Response							
<b><u>HYDRAULIC CONTROLS</u></b>							
Raise/Lower							
Forward/Back Tilt							
Squeeze/Side Shift							
Hose Reels/Hose							
Load Chains							
<b><u>CONDITION OF:</u></b>							
Tires							
Attachments							
Battery Cleaned							
Kill Switch Checked							
<b><u>BATTERY CHARGING STATION</u></b>							
PPE: All on hand?							
Condition?							
Exhaust system							
Spill kit							
No Flammable or Combustible Materials in Area							
<b><u>PROPANE TANK</u></b>							
Straps							
Fitting/Hoses							
Relief Valve							
<b><u>FLUID LEVELS</u></b>							
Engine Oil							
Transmission Oil							

Radiator ( Do not remove cap) Check overflow tank level							
<b><u>OIL LEAKAGE</u></b>							
<b><u>SUBSEQUENT DRIVERS CHECK</u></b>							
<b><u>REMARKS</u></b>							
<b><u>PROBLEMS CORRECTED</u></b>							

[illegible]
