AXCS Equipment

PRE-USE INSPECTION

Telehandler Forklift Pre-use Inspection Checklist

Operator: _____ **Make & Model:** _____

Company: _____ **Hour Meter Reading:** _____

Location: _____ **Date:** _____ **Unit No.:** _____

POWER OFF CHECKS	OK	NO	N/A
1) Wheels and Tires	☐	☐	☐
2) Lights/Strobes	☐	☐	☐
3) Mirrors/Visibility aids	☐	☐	☐
4) Engine/Engine compartment:			
a) Belts/Hoses	☐	☐	☐
b) Cables/Wires	☐	☐	☐
c) Debris	☐	☐	☐
5) Battery/Batteries:			
a) Terminals tight	☐	☐	☐
b) Clean/Dry/Secure	☐	☐	☐
6) Hydraulics:			
a) Cylinders/Rods	☐	☐	☐
b) Hoses/Lines/Fittings	☐	☐	☐
7) Fluids:			
a) Engine oil - level/leaks	☐	☐	☐
b) Engine coolant - level/leaks	☐	☐	☐
c) Hydraulic oil - level/leaks	☐	☐	☐
d) Fuel - level/leaks	☐	☐	☐
8) Data/Capacity Plate/Load Charts	☐	☐	☐
9) Windows/Glass/Doors	☐	☐	☐
10) Lifting Attachment(s)	☐	☐	☐
11) Counterweight/Counterweight bolt(s)	☐	☐	☐
12) Hood/Covers/Panels	☐	☐	☐
13) Air filter indicator	☐	☐	☐
14) Boom Sections - damage/wear pads	☐	☐	☐
15) Boom Angle Indicator - free movement	☐	☐	☐
16) ROPS/Cab	☐	☐	☐
17) Frame level indicator	☐	☐	☐
18) Seatbelt	☐	☐	☐
19) Other:	☐	☐	☐
_____	☐	☐	☐

POWER ON CHECKS	OK	NO	N/A
20) Unit starts and runs properly	☐	☐	☐
21) Instruments/Gauges	☐	☐	☐
22) Warning lights/audible alarms	☐	☐	☐
23) Fuel level	☐	☐	☐
24) Horn/audible warning device(s)	☐	☐	☐
25) Function controls:			
a) Boom/carriage - raise/lower/tilt/extend/retract	☐	☐	☐
b) Lifting attachment - proper movement	☐	☐	☐
c) Drive - forward/reverse	☐	☐	☐
d) Steer - left/right	☐	☐	☐
e) Frame level	☐	☐	☐
f) Outriggers	☐	☐	☐
26) Braking:			
a) Service/De-clutch	☐	☐	☐
b) Parking	☐	☐	☐
27) Other:	☐	☐	☐
_____	☐	☐	☐
GENERAL	**OK**	**NO**	**N/A**
28) Housekeeping	☐	☐	☐
29) Manufacturer operating manuals	☐	☐	☐
30) Decals/Warnings/Placards	☐	☐	☐
31) Misc. parts - loose/missing/broken	☐	☐	☐
WORKPLACE INSPECTION	**OK**	**NO**	**N/A**
32) Drop-offs or holes	☐	☐	☐
33) Bumps and floor/ground obstructions	☐	☐	☐
34) Debris	☐	☐	☐
35) Overhead obstructions	☐	☐	☐
36) Energized power lines	☐	☐	☐
37) Hazardous locations	☐	☐	☐
38) Ground surface and support conditions	☐	☐	☐
39) Pedestrian/vehicle traffic	☐	☐	☐
40) Wind and weather conditions	☐	☐	☐
41) Other possible hazards	☐	☐	☐

Report any problems found to your supervisor/employer. ALWAYS lock/tag-out unsafe equipment.

COMMENTS

Operator initials: _____ **Alternative operator initials:** _____