EQUIPMENT DAILY CHECKLIST AND SAFETY INSPECTION FORM

NOTE: This form is not to be used for inspections of mobile/overhead cranes, powered industrial trucks, or aerial lifts. Contact FBP H&R manager for crane inspections.

Section 1										
Location / Project: Contractor: ☐ FBP or										
Contact Name:										
Section 2 – Check Type of Equipment Inspecting										
☐ Backhoe ☐ Trackhoe ☐ Loade	r \square	Skid Steer		Manufacturer						
	ng Machine 🔲			Model Number						
☐ Tractor ☐ Roll-off Truck ☐ Other	_			Serial Number						
 Place a check (√) mark in the box to indicate inspection is complete and is satisfactory. Mark "P" in box where Problem is found and make further comments on next page, if necessary. Report all items in need of repair to the Supervisor at the time of inspection. Mark N/A for items which do not apply. 										
Section 3 – Mark as Directed Above	T		T			I				
Inspection Item / Day of Week	Mon	Tue	Wed	Thu	Fri	Sat	Sun			
Worker Badge Number										
Worker Initials										
Date										
Hour Meter Reading										
Structural Damage – none apparent										
Steps/Ladders Damage- none apparent										
Tires / Tracks – condition acceptable										
Load Chart – available/readable										
Glass / Mirrors – clean/clear; unobstructed										
Electrical Connections (generators)										
Hydraulic System – good condition/functional										
Lubrication – adequate amount										
Fluid Levels – adequate amounts/no leaks										
Engine Oil - level/appearance good										
Cooling Water – adequate amount/no leaks										
Operating Manual - available										
Seat Belts – functional/latch properly										
Operating Controls - functional										
Horn / Gauges - functional										
Lights and Reflectors – clean/functional										
Windshield Wipers - functional										
Air Systems - functional										
Steering Mechanism - functional										
Brakes - functional										
Backup Alarm - functional										
Kill Switch (if available) - functional										
Roll-off Truck Cable – no single strand broken; no kinks; no stretching; clamps tight										
Skid Steer Fork Attachments-Capacity Plate legible; No Visible damage to fork tips; no welding burns; stress cracks or saw marks.										
Wire rope inspection - visual										
Hook Inspection										

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Section 4 - Briefly explain items having problems						
Date	Repairs	D	ate Repaired			
Comments:						
Section 5 – Supervisor and Safety Representative Concurrence						
To be signed by the Superintendent and Safety Representative in the event deficiencies are discovered. All Equipment Daily Checklists and Safety Inspection Forms shall be filed with the Work Control Organization.						
Print/Signature of Supervisor Da		Date				
Print/Signatur	e of Safety Representative	Date				