**Appendix 2 \**This is an example of a pre- user check sheet for a forklift truck. Amendments may be required to the checklist dependant on the equipment and the manufactures instructions.***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **PRE-USER MOBILE EQUIPMENT CHECKLIST  (Forklift truck)** | | | | | | | |
| **All mobile work equipment must be checked daily. If any defects are noted and equipment is deemed unsafe to use, equipment should be taken out of service immediately and reported to management.** | | | | | | | |
| Date - Week Commencing |  | | | | | | |
| Circle day (of check) | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Employee Name |  | | | | | | |
| Employee Number |  | | | | | | |
| Equipment (Including Reference number) |  | | | | | | |
|  | | | | | | | |
| **ITEM** | **Yes/ No** | | **Defect description (Where applicable)** | | | **Reported (Y/ N)** | |
| Obvious Leaks |  | |  | | |  | |
| Hydraulic Fluid Level |  | |  | | |  | |
| Mast & Carriage |  | |  | | |  | |
| Chain and Fixing Bolts |  | |  | | |  | |
| Forks |  | |  | | |  | |
| Backrest/ Extension |  | |  | | |  | |
| Attachments |  | |  | | |  | |
| Wheels, tyres and nuts |  | |  | | |  | |
| Operating controls |  | |  | | |  | |
| Steering |  | |  | | |  | |
| Seatbelt and seat |  | |  | | |  | |
| Alarms |  | |  | | |  | |
| Warning Lights |  | |  | | |  | |
| Brakes and parking brakes |  | |  | | |  | |
| Horn |  | |  | | |  | |
| Lights |  | |  | | |  | |
| Gauges and Instruments |  | |  | | |  | |
| Safety guards and covers |  | |  | | |  | |
| Fuel Levels (Coolant, Fuel, Oil)  \* Petrol, Diesel, and LPG trucks only\* |  | |  | | |  | |
| Battery & Fan Belt \* Petrol, Diesel, and LPG trucks only\* |  | |  | | |  | |
| LPG Bottle security  \* LPG trucks only\* |  | |  | | |  | |
| General Cleanliness \*Electric trucks only\* |  | |  | | |  | |
| Battery Security & Cable connections \*Electric trucks only\* |  | |  | | |  | |
| Electrolyte Levels \*Electric trucks only\* |  | |  | | |  | |
|  |  | |  | | |  | |
| Employee Signature: |  |  |  |  |  |  |  |
| Date: |  |  |  |  |  |  |  |
| Managers Signature: |  |  |  |  |  |  |  |
| Date: |  |  |  |  |  |  |  |
| Detail corrective action for abovementioned defectives: | | | | | | | |