

PRE-SHIFT CHECKLIST – COUNTER BALANCE FORKLIFT

Company: _____

Name: _____ Date: _____

NOTE: THIS IS A GENERAL INSPECTION, EACH MANUFACTURER HAS DIFFERENT WEAR INDICATORS AND INSPECTION CRITERIA, ALWAYS CHECK SPECIFIC MANUFACTURER'S INSPECTION CRITERIA.

VISUAL INSPECTION:

- YES NO **Forks & Carriage:** Damaged, Bent, Worn. (Capacity)
- YES NO **Mast, Rollers & Chains:** Loose/ Missing Parts, Excessive Wear or Leaks.
- YES NO **Hydraulic Hoses & Cylinders:** Leaking or Damaged.
- YES NO **Tires, Wheels & Bolts:** Any Damage, Bolts are Tight.
- YES NO **Counterweight:** Secure, Good Condition and Clear.
- YES NO **Overhead Guard:** Good Condition. (Capacity in Foot – Pounds)
- YES NO **Seat & Seatbelt:** Good Working Condition.
- YES NO **LPG Tank & Hose:** Tank Secure, Hose Damaged Leaks. (Odors)
- YES NO **Operators Manual & Warning Decals:** Visible and Readable.
- YES NO **Capacity Plate Information:** Readable and Understood.
- YES NO **Fluid Checks:** (T.E.C.H – B) Transmission, Engine, Coolant, Hydraulics – Battery and Brakes

Other: _____

MECHANICAL INSPECTION:

- YES NO **Lights:** Front, Tail, Reverse and Brake lights. Good Working Condition
- YES NO **Gauges, Hour Meter:** Good Condition and Working.
- YES NO **Mast:** Lift Controls Smooth, Chain and Rollers Operating Freely, No Leak.
- YES NO **Steering:** Operates Freely, No Strange Noises.
- YES NO **Horn:** Works Properly.
- YES NO **Forward & Reverse:** Operates Smoothly.
- YES NO **Back-Up Alarm:** (if equipped) Good Working Condition
- YES NO **Emergency Brake:** Good Working Condition.
- YES NO **Service Brake:** No Loud Noises, Stops in Good Amount of Time.

Other: _____

Comments: _____

PASS: ____ SERVICE: ____ Supervisor Signature: _____



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