

SIT-DOWN PROPANE FORK LIFT OPERATOR DAILY CHECKLIST



DATE				INSPECTED BY			
MAKE			MODEL			S/N#	
HOUR			PROPANE / DIESEL				

MARK CIRCLE If **NO PROBLEMS** Visible. **KEEP UNMARKED** and **WRITE IN** Comment if **PROBLEMS ARE PRESENT**.

VISUAL INSPECTIONS

Write Comments

1	<input type="radio"/> Propane
	<input type="radio"/> Relief Valve
	<input type="radio"/> Fuel Level
	<input type="radio"/> No Leaks
	<input type="radio"/> Safety Straps
2	<input type="radio"/> Engine Compartment
	<input type="radio"/> Oil
	<input type="radio"/> Radiator
	<input type="radio"/> Air Filter
	<input type="radio"/> Fan Belt
	<input type="radio"/> Hydraulic Oil
	<input type="radio"/> Battery
3	<input type="radio"/> Overhead Guard
4	<input type="radio"/> Tilt Cylinder
5	<input type="radio"/> Carriage
6	<input type="radio"/> Mast
7	<input type="radio"/> Lift Cylinder
	<input type="radio"/> Lift Chains
8	<input type="radio"/> Forks & Locks
9	<input type="radio"/> Seat & Seat Belt
10	<input type="radio"/> Front Tires
11	<input type="radio"/> Rear Tires

OPERATIONAL INSPECTIONS

Write Comments

A	<input type="radio"/> Listen for Unusual Noise
B	<input type="radio"/> Check Service & Parking Brake
C	<input type="radio"/> Lifting Control
D	<input type="radio"/> Tilt Control
E	<input type="radio"/> Forward & Reverse Travel
	<input type="radio"/> Accelerator
	<input type="radio"/> Steering
	<input type="radio"/> Braking
	<input type="radio"/> Backup Alarm (If Equipped)
F	<input type="radio"/> Lights
G	<input type="radio"/> Horn
H	<input type="radio"/> Gauges
I	<input type="radio"/> Leak Spots

SIGNATURE: _____



WARNING: All parts and items which may need inspecting are not reflected in this worksheet. Operators are responsible for guaranteeing that the equipment is in proper working condition and in conformance with specifications. If any problems are found - DO NOT operate the equipment and immediately notify supervisor or manager.