



BIG JOE JI JOEY OPERATOR DAILY CHECKLIST

DATE		INSPECTED BY	
S/N#		HOUR	
		VOLTAGE	

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

VISUAL INSPECTIONS

Write Comments

1	<input type="checkbox"/> Front Basket
2	<input type="checkbox"/> Front Cover
3	<input type="checkbox"/> Battery
	<input type="checkbox"/> Battery Cover
	<input type="checkbox"/> Connectors
	<input type="checkbox"/> Cables
	<input type="checkbox"/> Vent Caps*
	<input type="checkbox"/> Water Level*
	<input type="checkbox"/> Battery Retainer Plate*
4	<input type="checkbox"/> Drive and Load Wheel
5	<input type="checkbox"/> Carriage
6	<input type="checkbox"/> Mast
7	<input type="checkbox"/> Lift Chains
8	<input type="checkbox"/> Cylinder Lift
9	<input type="checkbox"/> Data Plate

* If Applicable

OPERATIONAL INSPECTIONS

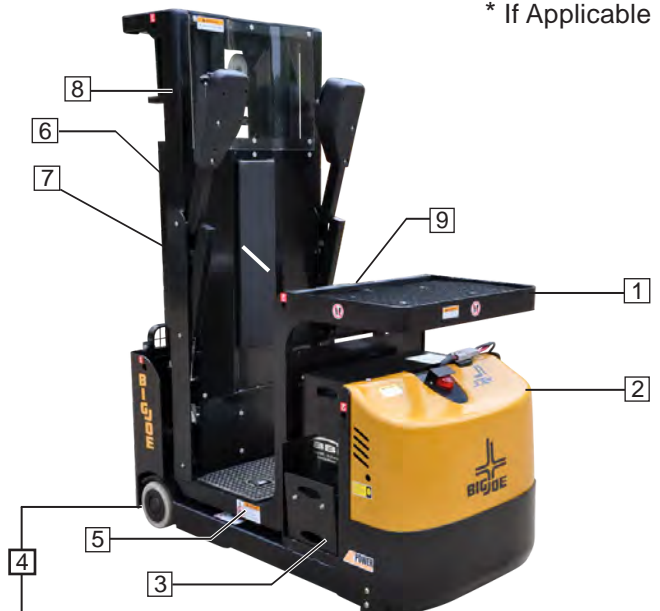
Write Comments

A	<input type="checkbox"/> Left / Right Arm Gates
B	<input type="checkbox"/> Listen For Unusual Noise
C	<input type="checkbox"/> "Deadman" Brake System
D	<input type="checkbox"/> Lift And Lower Controls
E	<input type="checkbox"/> Forward Travel
	<input type="checkbox"/> Steering
F	<input type="checkbox"/> Reverse Travel
	<input type="checkbox"/> Steering
	<input type="checkbox"/> Back-Up Alarm*
G	<input type="checkbox"/> No Movement With Foot OFF Deadman
H	<input type="checkbox"/> Lights
I	<input type="checkbox"/> Horn
J	<input type="checkbox"/> Gauges
K	<input type="checkbox"/> Rear Basket And Frame
L	<input type="checkbox"/> Oil Spots on Floor

* If Applicable

NOTATIONS:

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.

ARE YOU CERTIFIED?
 To Find Out More
 CALL BIG JOE 800-835-1133

