

VNA ELECTRIC EQUIPMENT OPERATOR DAILY CHECKLIST



DATE	<input type="text"/>	INSPECTED BY	<input type="text"/>
MAKE	<input type="text"/>	MODEL	<input type="text"/>
		S/N#	<input type="text"/>
HOUR	<input type="text"/>	VOLTAGE	<input type="text"/>

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

VISUAL INSPECTIONS

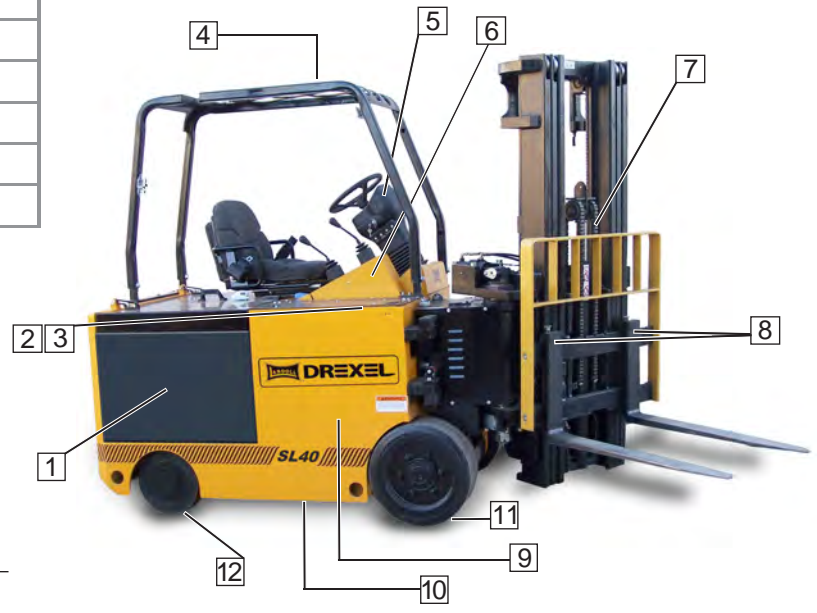
Write Comments

- | | |
|----|--|
| 1 | <input type="checkbox"/> Battery |
| | <input type="checkbox"/> Vent Caps |
| | <input type="checkbox"/> Water Level |
| | <input type="checkbox"/> Battery Restraint System |
| 2 | <input type="checkbox"/> Safety Warnings |
| 3 | <input type="checkbox"/> Capacity Plate |
| 4 | <input type="checkbox"/> Overhead Guard |
| 5 | <input type="checkbox"/> Dash Display |
| 6 | <input type="checkbox"/> Check Controls |
| | <input type="checkbox"/> Lift/Lower |
| | <input type="checkbox"/> Tilt |
| | <input type="checkbox"/> Side Shift |
| | <input type="checkbox"/> Pivot |
| | <input type="checkbox"/> Directional Switch |
| | <input type="checkbox"/> Speed Selection Switch |
| | <input type="checkbox"/> Attachment Switch |
| 7 | <input type="checkbox"/> Hydraulic Cylinders |
| 8 | <input type="checkbox"/> Forks, Retaining Pin & Heel |
| 9 | <input type="checkbox"/> Hydraulic Oil |
| 10 | <input type="checkbox"/> Static Straps |
| 11 | <input type="checkbox"/> Front Tires |
| 12 | <input type="checkbox"/> Rear Tires |

OPERATIONAL INSPECTIONS

Write Comments

- | | |
|---|---|
| A | <input type="checkbox"/> Investigate Unusual Noises |
| B | <input type="checkbox"/> Check Parking Brake |
| C | <input type="checkbox"/> Check Service Brake |
| D | <input type="checkbox"/> Check Pivot Arm Racking |
| E | <input type="checkbox"/> Check Mast Racking |
| F | <input type="checkbox"/> Check Accelerator |
| G | <input type="checkbox"/> Check Return-to-Neutral |
| H | <input type="checkbox"/> Check Seat Switch |
| I | <input type="checkbox"/> Check Horn |
| J | <input type="checkbox"/> Check Lights & Alarms |
| K | <input type="checkbox"/> Check Steering |
| L | <input type="checkbox"/> Check Seat Lumbar Side & Pivot |
| M | <input type="checkbox"/> Check Seat Belt, Buckle & Retractors |



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