**CONSTRUCTION HEAVY EQUIPMENT CHECKLIST** \*due once a week to Super\*

***Pre-Start***

Before starting the equipment, check all the following:

* **Parking:**Before you start, ensure that the parking brake is working correctly.

□ yes □ no

* **Seat Belts:**Are all belts extended and will lock properly?

□ yes □ no

* **Fluids and Oil:**All levels were checked?

□ yes □ no

* **Visible Leaks**: Has the ground under the equipment been checked? Any other drips?

□ yes □ no

* **Undercarriage:**Are there worn or broken parts?

□ yes □ no

* **Engine:** Have you checked the hoses, valves, and belts?

□ yes □ no

* **Tires:** Have the tires been checked for nails or punctures, and check pressure and tread level?

 □ yes □ no

* **Rims:** Have the rims been checked and no loose nuts noted?

□ yes □ no

* **Gauges and Lights in the Interior Cab:** Are they in working order?

□ yes □ no

* **Battery:** Is the battery charged and connected?

□ yes □ no

* **Suspension:** are there any vibrations or concerning noises

 □ yes □ no

* **Fan Belts:** Did you find any splits or tearing on belts, and checked tension levels?

 □ yes □ no

* **Cooling System:**Looked for leaks or damage?

□ yes □ no

* **Fuel system:** Checked the fuel level and look for leaks?

□ yes □ no

* **General Condition of Cab Interior:** The horn, mirrors, wipers, and seats are ready to use?

□ yes □ no

***Warm-Up***

After the equipment has had a chance to warm up for several minutes, check the following:

* **Horns**

□ yes □ no

* **Back-Up Alarms**

□ yes □ no

* **Air Filters:** Replace if needed

□ yes □ no

* **Lights:**Including brakes, headlights, reverse, turn, etc.

□ yes □ no

* **Hydraulics and Fluid Levels**

□ yes □ no

* **Brakes:** Check for air and fluid leaks

□ yes □ no

***Shutdown***

When shutting down the equipment, make sure to check the following items are done:

* **Fuel Tank:** Fill the tank and securely tighten the cap
* **Engine:**Let the engine idle for a few minutes before shutting off
* **Parking:** Park the equipment in a safe location

Inspected by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equipment type: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model/#: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_