

Your Company Name 123 Company Lane - New York, NY 12345 Tel. (123) 456-7890 - Fax. (123) 456-7890

Daily Forklift Inspection Checklist

| Date: | | | Unit Serial Number: |
|--|----------|-------------|---------------------|
| nspected By: | 10 | | |
| ОК | Low | Overfilled | Comments |
| L - Fluid Levels | | | |
| Engine Oil | | | |
| Coolant | | | |
| Hydraulic Oil | | | |
| Transmission Oil | | | |
| Differential | | | |
| Brake Fluid | | | |
| Battery Water Level | | | |
| 1 | | OK | Comments |
| ! - Engine | Yes | No | Comments |
| Oil Leak | 162 | INO | |
| | + | 1 | |
| Starting | | | |
| | (| OK | Comments |
| 3 - Transmission | Yes | No | |
| Oil Leak | | | |
| Operation | | | |
| | | | |
| | | OK | Comments |
| - Electrical (Operating Properly) | Yes | No | |
| Horn | | | |
| Directional Signals | | 1 1 1 | |
| Tail Lights | | + + + | |
| Brake Lights | | | |
| Reverse Lights | | | |
| Headlights | + | + | |
| | + | + | |
| Dash Gauges | | | |
| | | OK | Comments |
| 5 - Safety | Yes | No | |
| Backup Alarm/Strobe Light | | | |
| Seat Belt | | | |
| | <u> </u> | | |
| | | OK | Comments |
| - Steering/Operation | Yes | No | |
| Brakes (Tight) | - | 1 | |
| Steer Tires | L | 1 | |
| Drive Tires | | + (- (-) | |
| Steering Properly | | + | |
| | 1 | | |
| | | OK No. | Comments |
| 7 - Mast | Yes | No | |
| Operation (Lift/Tilt) | + | + | |
| Fork Locks Operational | + | _ | |
| Load Back Rest | 1 | | |
| Check Hoses & Cylinders for leaks | | | |
| Slack in Chains | | | |
| Hydraulic Leak | | | |
| | T , | OK | Comments |
| 3 - Cooling System | Yes | No | Confinents |
| Check Radiator for Debris | 163 | INU | |
| | + | + | |
| Leaks | 1 | 1 | |