



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

Loader Pre-Operational Inspection Checklist

Model: _____

Unit #: _____

| | Operator #1 | Operator #2 | Operator #3 | Operator #4 | Operator #5 |
|------------------------------|-------------|-------------|-------------|-------------|-------------|
| Operator Name | | | | | |
| Hour Meter Reading | | | | | |
| Date (Month/Day/Year) | | | | | |
| Operator's Signature | | | | | |

Certified Loader Operator: Complete this form, before each use. Check "OK" if the items are in good condition/operation or check the "Repair Required" if the item is not in proper order. **IMPORTANT:** The loader must not be utilized if there are any items that require repairs. Have a service company repair prior to use. **Note to Supervisor's:** It is your responsibility to ensure your operators are continually performing and documenting their pre-use inspections.

| Workplace Inspection | Criteria | Operator #1 | | Operator #2 | | Operator #3 | | Operator #4 | | Operator #5 | |
|-----------------------|---|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|
| | | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. |
| Underground Utilities | Call Before You Dig | | | | | | | | | | |
| Ground Conditions | Drop-offs, holes, obstructions, etc. | | | | | | | | | | |
| Overhead Hazards | MAD, structures, etc. | | | | | | | | | | |
| Unauthorized Access | People, vehicles, equipment, etc. | | | | | | | | | | |
| Safety Items | Fire extinguisher, PPE, eye wash, first aid kit, etc. | | | | | | | | | | |

| Key Off (Visual Check) | Criteria | Operator #1 | | Operator #2 | | Operator #3 | | Operator #4 | | Operator #5 | |
|-------------------------------|---|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|
| | | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. |
| General Overview | Park-brake, fluid leaks on ground, damage, etc. | | | | | | | | | | |
| Bucket/Attachment | Bent, cracked, locking pins, worn, capacity | | | | | | | | | | |
| Lift Arms | Broken welds, cracks, bent, greased, rust | | | | | | | | | | |
| Hydraulic Cylinders/Hoses | Leaks, damaged, bubbles/cuts on hose | | | | | | | | | | |
| Tires/Wheel/Tracks – All | Lug nuts, rim damage, sidewall, tread, pressure | | | | | | | | | | |
| ROPS/FOPS – All Sides | Broken welds, missing bolts, damaged areas | | | | | | | | | | |
| Capacity Plate/Safety Decals | Legible, attached to unit | | | | | | | | | | |
| Seatbelt/Operator Restraint | Worn, damage, working, locks when attached | | | | | | | | | | |
| Controls and Pedals | Hydraulic controls and pedals move freely | | | | | | | | | | |
| Counterweight | Bolts, damage, cracks in exhaust/radiator | | | | | | | | | | |
| Fluid Checks (All Accessible) | Engine oil/hydraulic/brake/transmission/coolant | | | | | | | | | | |
| Battery | Secure, cell caps, leaks, corrosion, cables | | | | | | | | | | |

| Key On (Oper. Checks) | Criteria | Operator #1 | | Operator #2 | | Operator #3 | | Operator #4 | | Operator #5 | |
|---------------------------|---|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|
| | | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. | OK | Repair Req'd. |
| Seatbelt | Seatbelt is engaged prior to any motion | | | | | | | | | | |
| Gauges | All warning lights and gauges | | | | | | | | | | |
| Warning Devices/Lights | Horn, backup alarm, all lights working | | | | | | | | | | |
| Parking and Service Brake | Parking brake holds when in gear, service brakes works travelling forward and reverse, stops unit | | | | | | | | | | |
| All Hydraulic Operations | Proper operation and no leak through full range of motion: lift, lower, tilt, reach, etc. | | | | | | | | | | |
| Steering | No unusual noise, excessive free-play | | | | | | | | | | |

Supervisor's Initials _____

Use the section below to indicate any items that need repair or special attention. If required, tag the unit out of service.
