



Plant Induction Checklist (PIC)

Inductee Details

Name of Worker:		Job title:
Driver's license No:	License Class:	Expiry Date: / /20
Does the operator have a Certificate of Competency in this or similar type of plant: : Yes: <input type="checkbox"/> No: <input type="checkbox"/>		
Type of Certificate:		No:

Plant Details

Plant type:	Make/Model:	
Unit No:	Attachments:	Modifications:

Induction Checklist

Element/Function/Task	Example	Completed
Controls	Levers, Foot pedals, Instrumentation, prestart	<input type="checkbox"/>
Slewing	Movement, Control, limitations, prestart	<input type="checkbox"/>
Attachment	Fitting, securing, checks, risks, limitations, storing,	<input type="checkbox"/>
Brakes	Operations, prestart	<input type="checkbox"/>
Engine	Operation, location, access, prestart	<input type="checkbox"/>
Entering/Exiting	3 points of contact, steps, slip/trip hazards	<input type="checkbox"/>
Fluids, Coolant, Oil, Grease	Locations, levels, frequency	<input type="checkbox"/>
Refueling	Locations, risks, type, level	<input type="checkbox"/>
Emergency Stops (if applicable)	Locations, prestart	<input type="checkbox"/>
Prestart Checks	Procedure	<input type="checkbox"/>
Capacity and limitations	Legal limits, lifting limits, Tare, GVM	<input type="checkbox"/>
Towing and/or transporting	Securing load, anchor points, loading procedure	<input type="checkbox"/>
Tools	Requirements, proper use, location	<input type="checkbox"/>
Wheels	Pressures, checks, prestart, changing, tensioning	<input type="checkbox"/>
Personal Protective Equipment	Requirements, location	<input type="checkbox"/>

Acknowledgement of Induction

The undersigned declare that they have received full training in the safe operation of the equipment listed above.

Signed:	Name:	Date:
Instructors Name:		