

	Power City Electric Safety Management System		Issue Date:	January 2001
			Revision Date:	
			Revision No.	
<b>Rental Equipment Inspection Checklist</b>			Policy Doc:	EQOPS
			Forms / Permits:	REIC
Preparation: Safety Mgr.	Authority: President	Issuing Dept: Safety	Form 308	Page 1 of 1

Inspect the following items prior to accepting delivery of equipment and when taken off rent

RENTED FROM: \_\_\_\_\_ METER READING \_\_\_\_\_

DATE RENTED: \_\_\_\_\_ DATE RETURNED: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_ PO #: \_\_\_\_\_

EQUIPMENT #: \_\_\_\_\_ DATE OF LAST SERVICE: \_\_\_\_\_

**(CHECK ALL THAT APPLY TO THE SPECIFIC EQUIPMENT BEING RENTED)**

YES      NO

- |     |   |       |       |
|-----|---|-------|-------|
| 1.  | Is there any visible structural damage? Details: _____                      | _____ | _____ |
| 2.  | Is there any tire damage? Details: _____                                    | _____ | _____ |
| 3.  | Are there loose lug nuts on wheels? Details: _____                          | _____ | _____ |
| 4.  | Are there any fluid leaks? Details: _____                                   | _____ | _____ |
| 5.  | Is there any damage to hydraulic hoses? Details: _____                      | _____ | _____ |
| 6.  | Are fluid level(s) o.k.?  | _____ | _____ |
| 7.  | Is engine oil level o.k.?   | _____ | _____ |
| 8.  | Is there any cable damage?  | _____ | _____ |
| 9.  | Does there appear to be any unsafe features? Details: _____                 | _____ | _____ |
| 10. | Is there a functional seat belt? Details: _____                             | _____ | _____ |
| 11. | Are all controls functioning properly? Details: _____                       | _____ | _____ |
| 12. | <u>Mounted</u> fire extinguisher with valid certification? Exp. Date: _____ | _____ | _____ |
| 13. | Is back-up alarm functioning? Details: _____                                | _____ | _____ |

COMMENTS: \_\_\_\_\_

INSPECTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_