

Forklift Operator's Daily Checklist

Internal Combustion Engine Industrial Truck - Gas/LPG/Diesel Truck

Production		Location	
Operator Name		Date	
License #		Expiration Date	
Make	Model #	Rental Company	
Fuel Level Start	Hour Meter Start	Hour Meter End	

SAFETY AND OPERATIONAL CHECKS (PRIOR TO EACH SHIFT)

Have a **qualified** mechanic correct all problems.

Engine Off Checks	Pass	Fail	Notes
Leaks – Fuel, Hydraulic Oil, Engine Oil or Radiator Coolant	<input type="checkbox"/>	<input type="checkbox"/>	
Tires – Condition and Pressure	<input type="checkbox"/>	<input type="checkbox"/>	
Forks, Top Clip Retaining Pin and Heel – Check Condition	<input type="checkbox"/>	<input type="checkbox"/>	
Load Backrest – Securely Attached	<input type="checkbox"/>	<input type="checkbox"/>	
Hydraulic Hoses, Mast Chains, Cables and Stops – Check Visually	<input type="checkbox"/>	<input type="checkbox"/>	
Overhead Guard – Attached	<input type="checkbox"/>	<input type="checkbox"/>	
Finger Guards – Attached	<input type="checkbox"/>	<input type="checkbox"/>	
Propane Tank (LP Gas Truck) – Rust Corrosion, Damage	<input type="checkbox"/>	<input type="checkbox"/>	
Safety Warnings – Attached (Refer to Parts Manual for Location)	<input type="checkbox"/>	<input type="checkbox"/>	
Battery – Check Water/Electrolyte Level and Charge	<input type="checkbox"/>	<input type="checkbox"/>	
All Engine Belts – Check Visually	<input type="checkbox"/>	<input type="checkbox"/>	
Hydraulic Fluid Level – Check Level	<input type="checkbox"/>	<input type="checkbox"/>	
Engine Oil Level – Dipstick	<input type="checkbox"/>	<input type="checkbox"/>	
Transmission Fluid Level – Dipstick	<input type="checkbox"/>	<input type="checkbox"/>	
Operator's Manual – In Container	<input type="checkbox"/>	<input type="checkbox"/>	
Nameplate – Attached and Information Matches Model, Serial Number and Attachments	<input type="checkbox"/>	<input type="checkbox"/>	
Seat Belt – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Hood Latch – Adjusted and Securely Fastened	<input type="checkbox"/>	<input type="checkbox"/>	
Brake Fluid – Check Level	<input type="checkbox"/>	<input type="checkbox"/>	

Engine On Checks	Pass	Fail	Notes
Unusual Noises Must Be Investigated Immediately			
Accelerator or Direction Control Pedal – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Service Brake – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Parking Brake – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Steering Operation – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Drive Control – Forward/Reverse – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Tilt Control – Forward and Back – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Hoist and Lowering Control – Functioning Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	
Attachment Control – Operation	<input type="checkbox"/>	<input type="checkbox"/>	
Horn and Lights – Functioning	<input type="checkbox"/>	<input type="checkbox"/>	
Cab (if equipped) – Heater, Defroster, Wipers – Functioning	<input type="checkbox"/>	<input type="checkbox"/>	
Gauges: Ammeter, Engine Oil Pressure, Hour Meter, Fuel Level, Temperature, Instrument Monitors – Functioning	<input type="checkbox"/>	<input type="checkbox"/>	

Please return this form to the Staging Supervisor or the Safety Consultant.