INDUSTRIAL SAFETY TRAINERS inc.

# DAILY PRE-USE INSPECTION FOR NARROW AISLES.

ENSURE THAT YOU HAVE INSPECTED THIS TRUCK BEFORE USING IT FOR THE FIRST TIME THIS SHIFT. DOCUMENT YOUR INSPECTION BELOW.

**NOTE: EACH OPERATOR USING A NARROW AISLE MUST PERFORM A PRE-USE INSPECTION**

Indicate an **X** where there is a problem detected

**Truck #** _____ **Capacity:**_____ **Hour Meter:** _____

**CAUTION: Operators are responsible for ensuring that the narrow aisle is in proper operating condition and to report any defects to their supervisor. IF NECESSARY – LOCK OUT EQUIPMENT TO PREVENT ACCIDENTAL USE**

## VISUAL INSPECTION

- ❑ **Battery**
  - o Vent Caps
  - o Connectors
  - o Cables
  - o Battery Retainer Plate
- ❑ **Propane**
  - o Relief Valve
  - o Fuel Level
  - o No Leaks
  - o Safety Straps
- ❑ **Engine Compartment**
  - o Oil
  - o Radiator
  - o Air Filter
  - o Fan Belt
- ❑ Rear Tires
- ❑ Front Tires
- ❑ Load Wheel
- ❑ Forks
- ❑ Fork Locking Pins
- ❑ Carriage Mast
- ❑ Cylinder Lift
- ❑ Lift Chains
- ❑ Tilt
- ❑ Reach
- ❑ Overhead Guard
- ❑ Drive Wheel
- ❑ Compartment Door
- ❑ Castor Wheel
- ❑ Hydraulic Oil
- ❑ Seat and Belts

## OPERATIONAL INSPECTION

- ❑ **Listen for Unusual Noise**
- ❑ **Check Parking Brake**
- ❑ **Lifting Control**
- ❑ **Forward control**
  - o Accelerators
  - o Steering
  - o Braking
- ❑ **Reverse Control**
  - o Accelerator
  - o Steering
  - o Braking
  - o Backup Alarm
- ❑ **Lights**
- ❑ **Horn**
- ❑ **Gauges**
- ❑ **Oil Spots on the Floor**

| DATE | TIME | OPERATORS SIGNATURE | COMMENTS |
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**To be completed by designated operators and when form is completed IT MUST be forwarded to your Shift Supervisor.**

**Website:** www.thesafetybus.com **E-Mail:** sales@thesafetybus.com
Phone: 705-792-0128 Toll Free: 1-800-219-8660 Fax: 705-792-6619