

Heavy Equipment Daily Inspection Checklist



[company logo]

Company Name

Equipment Operator's Daily Check _____

Name: _____
_____ For week starting (Monday) _____

- 0 Circle days worked.
- ✓ Check deficiencies.

Pre-Work Inspection	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Comments and Corrective Action	Date Completed	Initials
Oil level and Oil pressure	[]	[]	[]	[]	[]	[]	[]			
Water level	[]	[]	[]	[]	[]	[]	[]			
Fuel tank or tanks	[]	[]	[]	[]	[]	[]	[]			
Tires or Tracks	[]	[]	[]	[]	[]	[]	[]			
Brake Condition/Fluid	[]	[]	[]	[]	[]	[]	[]			
Engine warm-up	[]	[]	[]	[]	[]	[]	[]			
Other Fluids	[]	[]	[]	[]	[]	[]	[]			
Leaks	[]	[]	[]	[]	[]	[]	[]			
Lights and Backup Alarm	[]	[]	[]	[]	[]	[]	[]			
Engine	[]	[]	[]	[]	[]	[]	[]			
Clutch	[]	[]	[]	[]	[]	[]	[]			
Steering and Transmission	[]	[]	[]	[]	[]	[]	[]			
Horn and Gauges	[]	[]	[]	[]	[]	[]	[]			
Seatbelts	[]	[]	[]	[]	[]	[]	[]			
Window Wipers/Fluid	[]	[]	[]	[]	[]	[]	[]			
Windows and Mirrors	[]	[]	[]	[]	[]	[]	[]			
Rear axle or final drive	[]	[]	[]	[]	[]	[]	[]			
Loose bolts	[]	[]	[]	[]	[]	[]	[]			
Broken (bolts, braces, glass, hoses, etc.)	[]	[]	[]	[]	[]	[]	[]			
Secure (wiring, oil/air/water lines)	[]	[]	[]	[]	[]	[]	[]			
Lubrication	[]	[]	[]	[]	[]	[]	[]			
Fire ext. and tools	[]	[]	[]	[]	[]	[]	[]			
Spill kit	[]	[]	[]	[]	[]	[]	[]			
First Aid kit	[]	[]	[]	[]	[]	[]	[]			
PPE (fall protection, hard hat, glasses, etc.)	[]	[]	[]	[]	[]	[]	[]			
Guardrails/ Outriggers	[]	[]	[]	[]	[]	[]	[]			
ROPS	[]	[]	[]	[]	[]	[]	[]			
Safety Decals	[]	[]	[]	[]	[]	[]	[]			
No issues noted										

Source: BC Forest Safety Council