



Loader Backhoe Pre-use Inspection Checklist												
<b>Operator:</b>					<b>Make &amp; Model:</b>							
<b>Company:</b>					<b>Hour Meter Reading:</b>							
<b>Location:</b>					<b>Date:</b> MM/DD/YYYY			<b>Unit No.:</b>				
POWER OFF CHECKS				Status OK NO N/A			POWER ON CHECKS			Status OK NO N/A		
1) Underneath machine:							11) Unit starts and runs properly			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Wheels & Tires				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			12) Instruments/Gauges			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Steering rods/links				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			13) Hour Meter			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
c) Axles				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			14) Warning lights/audible alarms			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
2) Lights/Strobes				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			15) Fuel level			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
3) Mirrors/Visibility aids				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			16) Horn/audible warning device(s)			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
4) Engine/Engine compartment:							17) Function controls:					
a) Belts/Hoses				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			a) Drive – forward/reverse			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Cables/Wires				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			b) Steer – left/right			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
c) Debris				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			c) Front bucket controls			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
5) Battery/Batteries:							d) Bucket/Boom/Dipper/Attachment			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Terminals tight				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			e) Accessories			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Clean/Dry/Secure				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			18) Emergency/auxiliary controls			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
6) Hydraulics:							19) Wipers			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Cylinders/Rods				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			20) Seatbelt inspected & fastened			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Hoses/Lines/Fittings				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<b>GENERAL</b>			<b>OK NO N/A</b>		
c) Pins/Locks				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			21) Housekeeping			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
7) Fluids:							22) Manufacturer's operating manuals			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Engine oil           Level   Leaks				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			23) Decals/Warnings/Placards			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Engine coolant       Level   Leaks				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			24) Misc. parts – loose/missing/broken			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
c) Hydraulic oil        Level   Leaks				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			<b>WORKPLACE INSPECTION</b>			<b>OK NO N/A</b>		
d) Fuel/Battery         Level   Leaks				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			25) Drop-offs or holes			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
8) Chassis:							26) Bumps and floor/ground obstructions			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Cab/Glass/Doors				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			27) Debris			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Emergency Exit				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			28) Overhead obstructions			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
c) Entry/Exit steps				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			29) Energized power lines			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
d) ROPS/FOPS				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			30) Hazardous locations			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
e) Fire Extinguisher/Suppression System				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			31) Ground surface and support conditions			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
9) Digging Assembly:							32) Pedestrian/vehicle traffic			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
a) Boom/Dipper/Bucket/Attachment				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			33) Wind and weather conditions			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
b) Articulated joints				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			34) Other possible hazards			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
c) Front bucket & cutting edge				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
d) Bucket/attachment link pins & arms				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
10) Other:				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
<b>Report any problems found to your supervisor/employer. ALWAYS lock/tag-out unsafe equipment.</b>												
<b>Comments</b>												
Operator's initials:												
Alternative operator's initials:												