



**Fork Lift Operator Inspection Checklist**  
**ALL EQUIPMENT MUST BE INSPECTED DAILY**

Unit #: \_\_\_\_\_ Site: \_\_\_\_\_ Department: \_\_\_\_\_ Month/Year: \_\_\_\_\_

Hours for the Month- Starting: \_\_\_\_\_ Ending: \_\_\_\_\_

**Day Of The Month**

Item	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Please Print Operator/ Inspector Name																															
<b>Enter "P" for pass or "U" for unsafe. For items marked "U" enter the problem in the comments section below and the date corrected.</b>																															
Chassis/Mast: Cracks, Welds, Deformation																															
Wheels/Tires: Pressure, Cracks, Splits, Missing Lugs																															
Fluid Levels/Leaks: Oil, Fuel, Water, Battery(s), Hoses																															
Lights, Alarms, Backup Bell																															
Horn																															
Mirrors, Gauges, Seat Belt																															
Brakes: Operational, Parking																															
Steering, Lift Controls																															
Site: Holes/Drop-offs, Slopes, Grades, Uneven Surfaces																															
Site: Electrical, Water, Sprinkler, Chemical Lines																															
Site: Overhead Obstruction																															
Equipment and Site are Safe for Operation																															

Comments:

**REPORT ALL DEFECTS TO YOUR FOREMAN IMMEDIATELY**

Note: Any item marked with a  
"U" requires the unit be taken  
out of service until the  
problem is corrected by the

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