



## **Demo Company A**

### **Forklift Inspection Checklist**

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**Facility or Project Name**

Demo A Project

**Date of Inspection**

07/01/2022

**Completed/Inspected by**

Demo Owner

**Vehicle Type**

Forklift

**Is the vehicle in good overall good condition?**

Yes

**Is the Operator's Manual available?**

Yes

**Are Fire Extinguisher's readily available?**

Yes

**Is there any cosmetic damage?**

Yes

**What cosmetic damage does the vehicle have?**

Minor scratches and dents

**Headlights**

Yes

**Taillights**

Yes

**Signal Lights**

Yes

**Warning Lights**

Yes

**Seat**

Yes

**Seat Belt**

Yes

**Tires, Wheels & Rims**

Yes

**Overhead Cage Protection (ROPS)**

Not Applicable

**Forks**

Yes

**Mast**

Yes

**Mast Chains**

Yes

**Mast Tilt**

Yes

**Hydraulic Lines**

Yes

**Wiring**

Yes

**Brake Fluid**

Yes

**Engine Oil**

Not Applicable

**Fuel**

Not Applicable

**Hydraulic Fluid**

Yes

**Engine Coolant**

Not Applicable

**Starter Motor**

Not Applicable

**Battery Gauge**

Yes

**Oil Pressure Gauge**

Not Applicable

**Temperature Gauge**

Not Applicable

**Hour Meter Gauge**

Yes

**Seat Safety Switch**

Yes

**Backup Warning Device**

Yes

**Warning Light(s)**

Yes

**Parking Brake**

Yes

**Service Brake**

Yes

**Steering Controls**

Yes

**Transmission**

Not Applicable

**Mast Lift Up/Down**

Yes

**Mast Tilt**

Yes

**Mast Side/Squeeze**

Yes

**Inspector's Signature**

A handwritten signature in black ink, consisting of two distinct, stylized, overlapping shapes that resemble the letters 'M' and 'S' or similar characters.