

Form	
TRAIN PREPARATION CHECKLIST FORM	

Train No.		Date	
Inspected By	Name		ID No.
	Shift		Signature
<i>I hereby confirmed that I have completed the Train Preparation in accordance to HNL-09529 Train Inspection/Preparation.</i>			

This checklist is for train staff. Approach the train and walk through from one end to the other end covering all cars within the train.

PART 1 – Exterior Visual Check (One Side)				
Car body Cleanliness <i>No graffiti, no damages</i>	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Exterior Lightings Forward white lighting	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Exterior Lightings Rear red lighting	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
External PIS Display	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Current Collector	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Couplers	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Any "Do Not Move" boards/targets/restrictions posted	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Any obstructions	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking

Approved By:	<input type="checkbox"/> Director, Operations and Maintenance	<input type="checkbox"/> Department Manager	<input type="checkbox"/> Manager, HSE (Operations and Maintenance)
Signature:			
Date:			

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Any wheel scotch	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
All train doors	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Abnormal Sound when train doors open and close	<input type="checkbox"/> Yes (specify) <input type="checkbox"/> No			
Windows	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
<i>Does anything appear loose, cracked, damaged?</i>				
Additional remarks:				

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PART 2 – Interior Visual Check				
All train doors	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
All equipment lockers/covers	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Any left-over tools and equipment	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Interior light fixtures	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Air Conditioning (HVAC) fixtures	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
All fire extinguishers (2 per car)	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Internal Message Display	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Emergency Ladder	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Speaker Unit fixtures	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Interior Cleanliness	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
No circuit breakers tripped	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace

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	<input type="checkbox"/> Bad (<i>specify</i>)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	<input type="checkbox"/> Leaking
Does anything appear loose, cracked, damaged? Is the interior clean and fit for service?				
Additional remarks:				

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PART 3 – Emergency Drive Console Car E1				
Communication Panel Radio Test	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Communication Panel PA Test	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Master Controller Settings (Running Mode: AUTO)	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Any damages/ broken seals	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
<i>*Must be tested to confirm communication with OCC (TC/YC)</i>				
Additional remarks:				

PART 4 – Emergency Drive Console Car E2				
Communication Panel Radio Test*	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Communication Panel PA Test	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Master Controller Settings (Running Mode: AUTO)	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
Any damages/ broken seals	<input type="checkbox"/> Good			
	<input type="checkbox"/> OK (specify)	<input type="checkbox"/> Missing	<input type="checkbox"/> Damaged	<input type="checkbox"/> Repair/Replace
	<input type="checkbox"/> Bad (specify)	<input type="checkbox"/> Scratched	<input type="checkbox"/> Broken	
<i>*Must be tested to confirm communication with OCC (TC/YC)</i>				

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Additional remarks:
