

Date: 12/23/25

Equipment Operator's Pre-Shift Safety Check List

Note: (fill out this sheet before starting shift)

Equipment #: 862

Equipment Type: Backhoe

Shift: 2nd

Machine Hours: 10590

Codes:

OK	Repairs Made	Repairs Required
✓	0	X

Excessive oil or Hydraulic Leaks	✓	
Backup Alarm	✓	
Brakes: Foot	✓	
Brakes: Parking	✓	
Air System/Leaks/Building, holding pressure		
Fire Extinguisher	✓	
Lights	✓	
Horn (Electric)	✓	
Horn (Air)		
Windshield Wipers	✓	
Glass: Windshield	✓	
Glass: Door	✓	
Grab Rails	✓	
Steps	✓	
Safety Guards	✓	
Pin Conditions (If Applicable)	✓	
Mirrors	✓	
Heating/Air Conditioner Working	✓	
Wheel Chocks		
Seat Belts	✓	
Tires/Wheels	✓	
Steering/Fluid Level	✓	
Coolant Level/Leaks	✓	
Engine Oil Level/Leaks	✓	
Hydraulic Oil Level/Leaks	✓	
Transmission Oil Level/Leaks	✓	
Fuel Level	✓	
DEF Level		
Water Level		

Operator's Remarks:

Operator's Signature: [Signature]

Supervisor's Signature: [Signature]

Mechanic's Remarks:

Mechanic's Signature:

Date:

Equipment Operator's Pre-Shift Safety Check List

Date: 12/22/25

Note: (fill out this sheet before starting shift)

Equipment #: 343

Equipment Type: Water Truck

Shift: 2nd

Machine Hours: 96,663.5

Codes:

OK	Repairs Made	Repairs Required
✓	0	X

Excessive oil or Hydraulic Leaks	✓	
Backup Alarm	✓	
Brakes: Foot	✓	
Brakes: Parking	✓	
Air System/Leaks/Building, holding pressure	✓	
Fire Extinguisher	✓	
Lights	✓	
Horn (Electric)		
Horn (Air)	✓	
Windshield Wipers	✓	
Glass: Windshield	✓	
Glass: Door	✓	
Grab Rails	✓	
Steps	✓	
Safety Guards	✓	
Pin Conditions (If Applicable)	✓	
Mirrors	✓	
Heating/Air Conditioner Working	✓	
Wheel Chocks	✓	
Seat Belts	✓	
Tires/Wheels	✓	
Steering/Fluid Level	✓	
Coolant Level/Leaks	✓	
Engine Oil Level/Leaks	✓	
Hydraulic Oil Level/Leaks	✓	
Transmission Oil Level/Leaks	✓	
Fuel Level	✓	
DEF Level		
Water Level	✓	

Operator's Remarks:

Operator's Signature: [Signature]

Supervisor's Signature: [Signature]

Mechanic's Remarks:

Mechanic's Signature:

Date:

Equipment Operator's Pre-Shift Safety Check List

Date: 12/23/25
Equipment #: 1231
Equipment Type: EP120C
Shift: 2nd
Machine Hours: 9504.5

Note: (fill out this sheet before starting shift)

Codes:

OK	Repairs Made	Repairs Required
✓	0	X

Excessive oil or Hydraulic Leaks	✓	
Backup Alarm	✓	
Brakes: Foot	✓	
Brakes: Parking	✓	
Air System/Leaks/Building, holding pressure	✓	
Fire Extinguisher	✓	
Lights	✓	
Horn (Electric)	✓	
Horn (Air)		
Windshield Wipers	✓	
Glass: Windshield	✓	
Glass: Door	✓	
Grab Rails	✓	
Steps	✓	
Safety Guards	✓	
Pin Conditions (If Applicable)	✓	
Mirrors		
Heating/Air Conditioner Working	✓	
Wheel Chocks		
Seat Belts	✓	
Tires/Wheels	✓	
Steering/Fluid Level	✓	
Coolant Level/Leaks	✓	
Engine Oil Level/Leaks	✓	
Hydraulic Oil Level/Leaks	✓	
Transmission Oil Level/Leaks	✓	
Fuel Level	✓	
DEF Level	✓	
Water Level	✓	

Operator's Remarks: 1231.1 01281:24:11

Operator's Signature: [Signature]

Supervisor's Signature: [Signature]


Mechanic's Remarks:

Mechanic's Signature: Date:

Note:(fill out this sheet before starting shift)

Date 7-23

Excessive oil or hydraulic Leaks	
Backup Alarm	
Brakes:Foot	
Brakes: Parking	
Air System/Leaks/Building,holding pressure	
Fire Extinguisher	
Lights	
Horn(Electric)	
Horn(Air)	
Windshield Wipers	
Glass:Windshield	
Glass:Door	
Grab Rails	
Steps	
Safety Guards	
Pin Conditions (If Applicable)	
Mirrors	
Heating/Air Conditioner Working	
Wheel Chocks	
Seat Belts	
Tires/Wheels	
Steering/Fluid level	
Coolant Level/Leaks	
Engine Oil Level/Leaks	
Hydraulic Oil Level/Leaks	
Transmission Oil Level/Leaks	
Fuel Level	
DEF Level	
Water Level	

 OPERATOR'S SIGNATURE

MECHANIC'S SIGNATURE _____ DATE _____

Equipment Operator's Pre-Shift Safety Check List

Date: 12/25/25

Note: (fill out this sheet before starting shift)

Equipment #: 1242 Cube truck

Equipment Type: F-350

Shift: 2nd

Machine Hours: 106,985.5

Codes:

OK	Repairs Made	Repairs Required
✓	0	X

Excessive oil or Hydraulic Leaks	✓	
Backup Alarm	✓	
Brakes: Foot	✓	
Brakes: Parking	✓	
Air System/Leaks/Building, holding pressure		
Fire Extinguisher	✓	
Lights	✓	
Horn (Electric)	✓	
Horn (Air)		
Windshield Wipers	✓	
Glass: Windshield	✓	
Glass: Door	✓	
Grab Rails	✓	
Steps	✓	
Safety Guards	✓	
Pin Conditions (if Applicable)	✓	
Mirrors	✓	
Heating/Air Conditioner Working	✓	
Wheel Chocks	✓	
Seat Belts	✓	
Tires/Wheels	✓	
Steering/Fluid Level	✓	
Coolant Level/Leaks	✓	
Engine Oil Level/Leaks	✓	
Hydraulic Oil Level/Leaks	✓	
Transmission Oil Level/Leaks	✓	
Fuel Level	✓	
DEF Level		
Water Level		

Operator's Remarks: Drivers side, Inside rear tire flat.

Operator's Signature: [Signature]

Supervisor's Signature: [Signature]

Mechanic's Remarks: _____

Mechanic's Signature: _____

Date: _____

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill out this sheet before starting shift)

Equipment # 75234

Equipment Type Auger truck

Shift _____

Machine Hours _____

Date 12-23-25

OK ☒

Repairs Made 0

Repairs Required X

Codes:

Excessive oil or hydraulic Leaks	<input checked="" type="checkbox"/>
Backup Alarm	<input checked="" type="checkbox"/>
Brakes:Foot	<input checked="" type="checkbox"/>
Brakes: Parking	<input checked="" type="checkbox"/>
Air System/Leaks/Building,holding pressure	<input checked="" type="checkbox"/>
Fire Extinguisher	<input checked="" type="checkbox"/>
Lights	<input checked="" type="checkbox"/>
Horn(Electric)	<input checked="" type="checkbox"/>
Horn(Air)	<input checked="" type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>
Glass:Windshield	<input checked="" type="checkbox"/>
Glass:Door	<input checked="" type="checkbox"/>
Grab Rails	<input checked="" type="checkbox"/>
Steps	<input checked="" type="checkbox"/>
Safety Guards	<input checked="" type="checkbox"/>
Pin Conditions (If Applicable)	<input checked="" type="checkbox"/>
Mirrors	<input checked="" type="checkbox"/>
Heating/Air Conditioner Working	<input checked="" type="checkbox"/>
Wheel Chocks	<input checked="" type="checkbox"/>
Seat Belts	<input checked="" type="checkbox"/>
Tires/Wheels	<input checked="" type="checkbox"/>
Steering/Fluid level	<input checked="" type="checkbox"/>
Coolant Level/Leaks	<input checked="" type="checkbox"/>
Engine Oil Level/Leaks	<input checked="" type="checkbox"/>
Hydraulic Oil Level/Leaks	<input checked="" type="checkbox"/>
Transmission Oil Level/Leaks	<input checked="" type="checkbox"/>
Fuel Level	<input checked="" type="checkbox"/>
DEF Level	<input checked="" type="checkbox"/>
Water Level	<input checked="" type="checkbox"/>

OPERATOR REMARKS:

Back up Alarm and lights work Then flicker on and off then quit working
Park brake not holding

Ann Bell
OPERATOR'S SIGNATURE

[Signature]
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE _____

DATE _____