

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer

DATE: 12/1/25

EQUIPMENT TYPE AND NUMBER: 1295

STARTING HOURS: 1055

OK

REPAIRS MADE

REPAIRS REQUIRED

SHIFT NO. Day

CODES:



\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
Steps or ladders	Tracks: pads/sprockets
Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
Emergency Functions	
Other:	

OPERATOR REMARKS:

A arm bushings

[Signature]  
OPERATOR'S SIGNATURE

[Signature]  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Green  
EQUIPMENT TYPE AND NUMBER: 1055  
STARTING HOURS: 3988  
SHIFT NO. Day

DATE: 12/1/25

OK

REPAIRS MADE

REPAIRS REQUIRED

CODES:



\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input type="checkbox"/> Service Brakes	<input type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input type="checkbox"/> Hydraulic system working
<input type="checkbox"/> Mirrors: broken	<input type="checkbox"/> Mirrors: cracked
<input type="checkbox"/> Windshield: broken	<input type="checkbox"/> Windshield: cracked
<input type="checkbox"/> Windows: broken	<input type="checkbox"/> Windows: cracked
<input type="checkbox"/> Steps or ladders	<input type="checkbox"/> Tracks: pads/sprockets
<input type="checkbox"/> Handrails/Grab-rails	<input type="checkbox"/> Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input type="checkbox"/> Windshield Wipers	
<input type="checkbox"/> Emergency Functions	
<input type="checkbox"/> Other:	

OPERATOR REMARKS:

LLC  
OPERATOR'S SIGNATURE

LLC  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer

EQUIPMENT TYPE AND NUMBER: 1225

STARTING HOURS: 5044

SHIFT NO. Day

DATE: 12/1/25


OK ☒ REPAIRS MADE ☐ REPAIRS REQUIRED ☒


CODES: ☒ ☐ ☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

SAFETY CHECKS	OPERATIONAL CHECKS
<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input type="checkbox"/> Service Brakes	<input type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input type="checkbox"/> Hydraulic system working
<input type="checkbox"/> Mirrors: broken	<input type="checkbox"/> Mirrors: cracked
<input type="checkbox"/> Windshield: broken	<input type="checkbox"/> Windshield: cracked
<input type="checkbox"/> Windows: broken	<input type="checkbox"/> Windows: cracked
<input type="checkbox"/> Steps or ladders	<input type="checkbox"/> Tracks: pads/sprockets
<input type="checkbox"/> Handrails/Grab-rails	<input type="checkbox"/> Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input type="checkbox"/> Windshield Wipers	
<input type="checkbox"/> Emergency Functions	
<input type="checkbox"/> Other:	

OPERATOR REMARKS:

  
OPERATOR'S SIGNATURE

  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Career  
EQUIPMENT TYPE AND NUMBER: 810  
STARTING HOURS: 56393  
SHIFT NO. 1

DATE: 12/1/25

OK

REPAIRS MADE REPAIRS REQUIRED :



CODES:

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:

[Signature]  
OPERATOR'S SIGNATURE

[Signature]  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer Limestone

DATE: 12-1-25

EQUIPMENT TYPE AND NUMBER: 12660

STARTING HOURS: 5:18.5

OK      REPAIRS MADE      REPAIRS REQUIRED

SHIFT NO. Day

CODES:

☒
☐
☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:

David Collins

OPERATOR'S SIGNATURE

[Signature]

SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: \_\_\_\_\_

DATE: 12/23

EQUIPMENT TYPE AND NUMBER: 790

STARTING HOURS: 6:29:27

SHIFT NO. 47

OK

REPAIRS MADE

REPAIRS REQUIRED

CODES:



\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

/ Lights: Head lights, tail lights, brake lights	X Lights: Parking lights, running lights
/ Warning decals, lights or alarms	/ Gauges and Instruments
/ Steering	/ Engine Oil: Fluid level, leaks
/ Service Brakes	X Hydraulic Oil: Fluid level, leaks
/ Parking Brakes	/ Radiator: fluid level, leaks
/ Horn	Battery: Low fluid, loose connections
/ Back-up Alarm	Fuel: Level, leaks, filters
/ Seatbelt	/ Tires/wheels: Pressure, wear, damage
Air System: Building and holding pressure	/ Engine: Run rough, leaks, unusual noises
/ Fire Extinguisher: charged, retainer pin, tag	/ Hydraulic system working
/ Mirrors: broken	/ Mirrors: cracked
/ Windshield: broken	/ Windshield: cracked
/ Windows: broken	/ Windows: cracked
/ Steps or ladders	Tracks: pads/sprockets
/ Handrails/Grab-rails	Other:
/ Safety guards/mud flaps	
/ Windshield Wipers	
Emergency Functions	
Other:	

OPERATOR REMARKS:

needs washed

WA

OPERATOR'S SIGNATURE

MECHANIC REMARKS:

[Signature]

SUPERVISOR'S SIGNATURE

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer  
EQUIPMENT TYPE AND NUMBER: 931  
STARTING HOURS: 43685.9  
SHIFT NO. Day

DATE: 12/1/25

OK ☒ REPAIRS MADE ☐ REPAIRS REQUIRED ☒

CODES:

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	<input checked="" type="checkbox"/> Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
<input checked="" type="checkbox"/> Other:	

## OPERATOR REMARKS:

Driver side high beam is out. Horn not working all time.  
Front right side cylinder is bad. Back up camera not working.

Loren Sirbaugh  
OPERATOR'S SIGNATURE

[Signature]  
SUPERVISOR'S SIGNATURE

## MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer DATE: 12-1-25  
 EQUIPMENT TYPE AND NUMBER: 775G New TK  
 STARTING HOURS: 6840 OK REPAIRS MADE REPAIRS REQUIRED  
 SHIFT NO. Day CODES: ☒ ☐ ☐ ☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:

\_\_\_\_\_

OPERATOR'S SIGNATURE SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

\_\_\_\_\_

MECHANIC SIGNATURE

DATE



# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Mine DATE: 12-1-25  
EQUIPMENT TYPE AND NUMBER: 979  
STARTING HOURS: 41, 547 OK REPAIRS MADE REPAIRS REQUIRED  
SHIFT NO. 1 CODES: ☒ ☐ ☐

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:

Right Front Step Bent

TJ Bratty  
OPERATOR'S SIGNATURE

[Signature]  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer DATE: 12/1/25  
 EQUIPMENT TYPE AND NUMBER: 225F / 4101  
 STARTING HOURS: 28865 OK REPAIRS MADE REPAIRS REQUIRED  
 SHIFT NO. Day CODES: ☒ ☐ ☐ ☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

## OPERATOR REMARKS:

Front Right Step Needs Fixed  
Quick Fill Fuel leaks

[Signature]  
 OPERATOR'S SIGNATURE

[Signature]  
 SUPERVISOR'S SIGNATURE

## MECHANIC REMARKS:

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 \_\_\_\_\_  
 \_\_\_\_\_

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Gravel

DATE: 12/1/25

EQUIPMENT TYPE AND NUMBER: 1014

STARTING HOURS: 37843.0

OK

REPAIRS MADE

REPAIRS REQUIRED

SHIFT NO. Day

CODES:



\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:

Wesley Summers

OPERATOR'S SIGNATURE

MECHANIC REMARKS:

Tim C

SUPERVISOR'S SIGNATURE

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Chen DATE: 12/1/25  
 EQUIPMENT TYPE AND NUMBER: 1100  
 STARTING HOURS: 30580 OK REPAIRS MADE REPAIRS REQUIRED  
 SHIFT NO. Day CODES: ☒ ☐ ☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

SAFETY CHECKS	OPERATIONAL CHECKS
<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure <u>wear, damage</u>
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails <u>Bent</u>	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS: Fuel level in Red ! Run tires in rough shape

OPERATOR'S SIGNATURE

SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer DATE: 12-1-25  
EQUIPMENT TYPE AND NUMBER: 970 WH Truck  
STARTING HOURS: 9649 OK REPAIRS MADE REPAIRS REQUIRED  
SHIFT NO. 1 CODES: ☒ ☐ ☒


\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	<input checked="" type="checkbox"/> Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
<input checked="" type="checkbox"/> Other:	

OPERATOR REMARKS:

  
OPERATOR'S SIGNATURE  
MECHANIC REMARKS:

  
SUPERVISOR'S SIGNATURE

MECHANIC SIGNATURE

DATE

# EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Greer

DATE: 12-1-25

EQUIPMENT TYPE AND NUMBER: 807

STARTING HOURS: \_\_\_\_\_

SHIFT NO. Day

OK

REPAIRS MADE

REPAIRS REQUIRED

CODES:



\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

## SAFETY CHECKS

## OPERATIONAL CHECKS

<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	<input checked="" type="checkbox"/> Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
<input checked="" type="checkbox"/> Other:	

OPERATOR REMARKS:

Small power steering leak, Passenger  
Side mod flap missing

OPERATOR'S SIGNATURE \_\_\_\_\_

SUPERVISOR'S SIGNATURE [Signature]

MECHANIC REMARKS:

MECHANIC SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note: (fill this out prior to the start of the shift)

LOCATION: Grmr

EQUIPMENT TYPE AND NUMBER: 740

STARTING HOURS: \_\_\_\_\_

SHIFT NO. Day

DATE: 12/01/25

OK ☒    REPAIRS MADE ☐    REPAIRS REQUIRED ☒

CODES: ☒    ☐    ☒

\*IF YOU HAVE ANY QUESTIONS OR DOUBT IF EQUIPMENT IS OPERABLE SPEAK WITH A MECHANIC OR SUPERVISOR IMMEDIATELY

SAFETY CHECKS	OPERATIONAL CHECKS
<input checked="" type="checkbox"/> Lights: Head lights, tail lights, brake lights	<input checked="" type="checkbox"/> Lights: Parking lights, running lights
<input checked="" type="checkbox"/> Warning decals, lights or alarms	<input checked="" type="checkbox"/> Gauges and Instruments
<input checked="" type="checkbox"/> Steering	<input checked="" type="checkbox"/> Engine Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Service Brakes	<input checked="" type="checkbox"/> Hydraulic Oil: Fluid level, leaks
<input checked="" type="checkbox"/> Parking Brakes	<input checked="" type="checkbox"/> Radiator: fluid level, leaks
<input checked="" type="checkbox"/> Horn	<input checked="" type="checkbox"/> Battery: Low fluid, loose connections
<input checked="" type="checkbox"/> Back-up Alarm	<input checked="" type="checkbox"/> Fuel: Level, leaks, filters
<input checked="" type="checkbox"/> Seatbelt	<input checked="" type="checkbox"/> Tires/wheels: Pressure, wear, damage
<input checked="" type="checkbox"/> Air System: Building and holding pressure	<input checked="" type="checkbox"/> Engine: Run rough, leaks, unusual noises
<input checked="" type="checkbox"/> Fire Extinguisher: charged, retainer pin, tag	<input checked="" type="checkbox"/> Hydraulic system working
<input checked="" type="checkbox"/> Mirrors: broken	<input checked="" type="checkbox"/> Mirrors: cracked
<input checked="" type="checkbox"/> Windshield: broken	<input checked="" type="checkbox"/> Windshield: cracked
<input checked="" type="checkbox"/> Windows: broken	<input checked="" type="checkbox"/> Windows: cracked
<input checked="" type="checkbox"/> Steps or ladders	Tracks: pads/sprockets
<input checked="" type="checkbox"/> Handrails/Grab-rails	Other:
<input checked="" type="checkbox"/> Safety guards/mud flaps	
<input checked="" type="checkbox"/> Windshield Wipers	
<input checked="" type="checkbox"/> Emergency Functions	
Other:	

OPERATOR REMARKS:  
Air Filters plugged. Fuel Filters need changed

Buback .H  
OPERATOR'S SIGNATURE

[Signature]  
SUPERVISOR'S SIGNATURE

MECHANIC REMARKS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_