

Equipment Operator's Pre-Shift Safety Check List

Date: 11-19-25

Note: (fill out this sheet before starting shift)

Equipment #: 1299

Equipment Type: Kubota

Shift: Day

Machine Hours: 1105.3

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	N/A	
Fire Extinguisher	✓	
Lights	✓	
Horn (Electric)	✓	
Horn (Air)	N/A	
Windshield Wipers	✓	
Glass: Windshield	✓	
Glass: Door	✓	
Grab Rails	N/A	
Steps	N/A	
Safety Guards	✓	
Pin Conditions (If Applicable)	N/A	
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	N/A	
Water Level	N/A	

Operator's Remarks: _____

Operator's Signature: E. R. S.

Supervisor's Signature: E. R. S.

Mechanic's Remarks: _____

Mechanic's Signature: _____

Date: _____

Equipment Operator's Pre-Shift Safety Check List

Date: 11-19-25

Note: (fill out this sheet before starting shift)

Equipment #: 1242

Equipment Type: F-350

Shift: Day

Machine Hours: 706697

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: 

Supervisor's 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 # 343

Equipment Type water truck
Shift Day
Machine Hours 6707

Date 11-19-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	0	X

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"/>
	<i>N/A</i>

OPERATOR REMARKS:

John Kline
OPERATOR'S SIGNATURE

[Signature]
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1121

Equipment Type TLG

Shift Day

Machine Hours 3999

Date 11-19-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	X

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

OPERATOR REMARKS:


OPERATOR'S SIGNATURE


SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

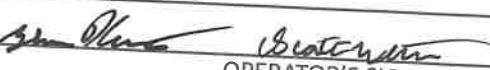
Note:(fill out this sheet before starting shift)

Equipment # 962Date 11-19-25Equipment Type BaileysShift DayMachine Hours 10518

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	X

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	N/A
Horn(Electric)	<input checked="" type="checkbox"/>
Horn(Air)	<input checked="" type="checkbox"/>
Windshield Wipers	<input checked="" type="checkbox"/>
Glass:Windshield	N/A
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	N/A
	N/A

OPERATOR REMARKS:


 OPERATOR'S SIGNATURE



SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1223Date 11-19-25Equipment Type IntShift DayMachine Hours 8355

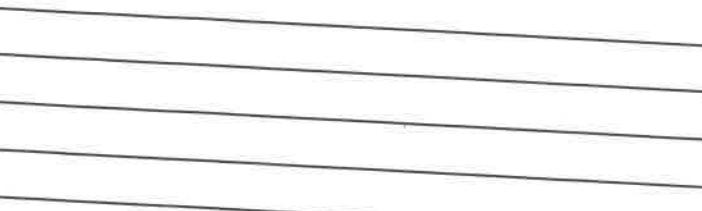
Codes:	OK	Repairs Made	Repairs Required
	✓	0	X

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	NG
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 REMARKS:

1223-1 - 5.30 OPERATOR'S SIGNATURE SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

 MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1196

Equipment Type 336

Shift Day

Machine Hours 11494

Date 11-16-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	<input type="checkbox"/> O	X

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:

John Davis
OPERATOR'S SIGNATURE

Eric
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

COMPONENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1020

Equipment Type Gradall

Shift Day

Machine Hours 4630

Date 10-19-25

Codes:	OK	Repairs Made	Repairs Required
	✓	O	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	✓
	N/A
	N/A

OPERATOR REMARKS:


OPERATOR'S SIGNATURE


SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1132

Equipment Type F350

Shift Day

Machine Hours 115616

Date 11-19-25

Codes:	OK	Repairs Made	Repairs Required
	✓	O	X

Excessive oil or hydraulic Leaks	✓
Backup Alarm	✓
Brakes:Foot	✓
Brakes: Parking	✓
Air System/Leaks/Building,holding pressure	✓
Fire Extinguisher	✓
Lights	N/A
Horn(Electric)	✓
Horn(Air)	✓
Windshield Wipers	✓
Glass:Windshield	✓
Glass:Door	N/A
Grab Rails	✓
Steps	✓
Safety Guards	✓
Pin Conditions (If Applicable)	N/A
Mirrors	N/A
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	N/A
Water Level	N/A

OPERATOR REMARKS:

John D. Scott
OPERATOR'S SIGNATURE

EXP
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

Equipment Operator's Pre-Shift Safety Check List

Date: 11-19-25

Note: (fill out this sheet before starting shift)

Equipment #: 1231

Equipment Type: Epiroc

Shift: Day

Machine Hours: 9179.7

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	N/A	
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: Seat is Bad

1231.1 1240:37

Operator's Signature: Brett Weller

Supervisor's Signature: EB

Mechanic's Remarks:

Mechanic's Signature:

Date:

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1275
 Equipment Type Sandvik
 Shift Day
 Machine Hours 3653

Date 11-18-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	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 REMARKS:

air in bypass

climate control doesn't work

3654

1293

QJM
OPERATOR'S SIGNATURE

ESB
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1275
 Equipment Type DT 912 Sandvik Drill
 Shift DAY
 Machine Hours 3663

Date 11-19-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	X

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

Not working

OPERATOR REMARKS:

Han
OPERATOR'S SIGNATURE

ESR
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

1275.1 *Han* 1296
1275.2 *Conrad* 3663

MECHANIC'S SIGNATURE

DATE

Equipment Operator's Pre-Shift Safety Check List

Date: 11/18/25

Note: (fill out this sheet before starting shift)

Equipment #: 1231

Equipment Type: EP1Roc

Shift: 2nd

Machine Hours: 9168.7

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 01239:09:01

Operator's Signature: Park

Mechanic's Remarks:

Mechanic's Signature:

Supervisor's Signature: John

Date:

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1247

Equipment Type UV11

Shift Night

Machine Hours 3036.2

Date 11-18-23

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	X

Excessive oil or hydraulic Leaks	
Backup Alarm	
Brakes:Foot	
Brakes: Parking	
Air System/Leaks/Building,holding pressure	
Fire Extinguisher	
Lights	X
Horn(Electric)	
Horn(Air)	
Windshield Wipers	
Glass:Windshield	N/A
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 REMARKS:

air compressor barometer don't work, air leak
on passenger side tank

Tommy Brown
OPERATOR'S SIGNATURE

J. H. Haas
SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1031

Equipment Type Fuel truck

Shift Night

Machine Hours 207039

Date 11-18-25

Codes:	OK	Repairs Made	Repairs Required
	<input checked="" type="checkbox"/>	O	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	N/A
Glass:Door	✓
Grab Rails	✓
Steps	✓
Safety Guards	✓
Pin Conditions (If Applicable)	✓
Mirrors	✓
Heating/Air Conditioner Working	N/A
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	N/A N/A

OPERATOR REMARKS:

Daniel man

OPERATOR'S SIGNATURE

J. J. H.

SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

DATE

OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 75234

Equipment Type Austin truck

Shift Night

Machine Hours _____

Date 11-18-25

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 REMARKS:

Backup Alarm and lights flicker on and off then quit working

Jeff Bell

OPERATOR'S SIGNATURE

John H.

SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE

Date: 11-18**Equipment Operator's Pre-Shift Safety Check List**

Note: (fill out this sheet before starting shift)

Equipment #: 1196Equipment Type: 336Shift: 2

Machine Hours: _____

Codes:

OK	Repairs Made	Repairs Required
✓	O	X
Excessive oil or Hydraulic Leaks		
Backup Alarm	/	
Brakes: Foot	/	
Brakes: Parking	/	
Air System/Leaks/Building, holding pressure	/	
Fire Extinguisher	M	
Lights	/	
Horn (Electric)	/	
Horn (Air)	/	
Windshield Wipers	M	
Glass: Windshield	/	
Glass: Door	/	
Grab Rails	/	
Steps	/	
Safety Guards	/	
Pin Conditions (If Applicable)	/	
Mirrors	/	
Heating/Air Conditioner Working	/	
Wheel Chocks	M	
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: John H.Supervisor's Signature: Frank J.

Mechanic's Remarks: _____

Mechanic's Signature: _____

Date: _____

Date: 1/18**Equipment Operator's Pre-Shift Safety Check List**

Note: (fill out this sheet before starting shift)

Equipment #: 1212Equipment Type: 980Shift: 2

Machine Hours: _____

Codes:

OK	Repairs Made	Repairs Required
✓	O	X
Excessive oil or Hydraulic Leaks	/	
Backup Alarm	/	
Brakes: Foot	/	
Brakes: Parking	/	
Air System/Leaks/Building, holding pressure		
Fire Extinguisher	MA	
Lights	/	
Horn (Electric)	/	
Horn (Air)	/	
Windshield Wipers	MA	/
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	MA	

Operator's Remarks: _____

Operator's Signature: 

Mechanic's Remarks: _____

Supervisor's Signature: 

Mechanic's Signature: _____

Date: _____

Equipment Operator's Pre-Shift Safety Check List

Date: 11-18

Note: (fill out this sheet before starting shift)

Equipment #: 1020

Equipment Type: G/A

Shift: 2

Machine Hours: _____

Codes:

OK	Repairs Made	Repairs Required
✓	O	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)	NA	/
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	NA	

Operator's Remarks: _____

Operator's Signature: Jon H.

Mechanic's Remarks: _____

Mechanic's Signature: _____

Supervisor's Signature: Jon H.

Date: _____