

# Equipment Operator's Pre-Shift Safety Check List

Date: 11-10-25

Note: (fill out this sheet before starting shift)

Equipment #: 342

Equipment Type: 769H0V1

Shift: Night

Machine Hours: 32935

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                                 |  |  |

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

Note:(fill out this sheet before starting shift)

Equipment # 1106  
 Equipment Type Toyota  
 Shift Day  
 Machine Hours 11457

Date 11-10-25

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

## OPERATOR REMARKS:

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

EVOV

OPERATOR'S SIGNATURE

Doug Rogan

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 # 1106  
 Equipment Type Toyota  
 Shift Day  
 Machine Hours 11457

Date 11-10-25

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

## OPERATOR REMARKS:

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

Doug Bogan

OPERATOR'S SIGNATURE

Doug Bogan

SUPERVISOR'S SIGNATURE

## MECHANICS REMARKS:

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

MECHANIC'S SIGNATURE

DATE

# Equipment Operator's Pre-Shift Safety Check List

Date: 11-10-25

Note: (fill out this sheet before starting shift)

Equipment #: 919

Equipment Type: Vac truck

Shift: day

Machine Hours: 11,903

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                                 | ✓ |  |

Operator's Remarks:

Operator's Signature:

Robbie Remington

Supervisor's Signature:

[Signature]

Mechanic's Remarks:

Mechanic's Signature:

Date:

# Equipment Operator's Pre-Shift Safety Check List

Date: November, 10, 2025

Note: (fill out this sheet before starting shift)

Equipment #: 945

Equipment Type: 980H - Loader

Shift: Day 1<sup>st</sup>

Machine Hours: 39049.3

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                                      |      | X |
| 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                                |      | X |
| Steering/Fluid Level                        | ✓    |   |
| Coolant Level/Leaks                         | ✓    |   |
| Engine Oil Level/Leaks                      | ✓    |   |
| Hydraulic Oil Level/Leaks                   | ✓    |   |
| Transmission Oil Level/Leaks                | ✓    |   |
| Fuel Level                                  | Full |   |
| DEF Level                                   |      |   |
| Water Level                                 |      |   |

Operator's Remarks: Rear lights still going off., Rear Tire Tread is not good.

Operator's Signature: Jay Reckm

Supervisor's Signature: Frogman

Mechanic's Remarks: \_\_\_\_\_

Mechanic's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Equipment Operator's Pre-Shift Safety Check List

Date: November, 10, 2025

Note: (fill out this sheet before starting shift)

Equipment #: 342

Equipment Type: 769C Haul Truck

Shift: Day 1st

Machine Hours: 32435

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             | X    |  |
| 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                                  | Full |  |
| DEF Level                                   |      |  |
| Water Level                                 |      |  |

Operator's Remarks: A/c No good.

Operator's Signature: [Signature]

Supervisor's Signature: [Signature]

Mechanic's Remarks:

Mechanic's Signature: \_\_\_\_\_

Date: \_\_\_\_\_



WO

Date: 11-10-29

# Equipment Operator's Pre-Shift Safety Check List

Note: (fill out this sheet before starting shift)

Equipment #: 945

Equipment Type: 980H

Shift: Night

Machine Hours: 39050

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                                 |  | ✓ |

new

Operator's Remarks: Back tires are bad Center pin needs looked at Boom controls randomly stop working.

Operator's Signature: Jacae teller

Supervisor's Signature: John M. Miller

Mechanic's Remarks:

Mechanic's Signature:

Date:

WO

## Equipment Operator's Pre-Shift Safety Check List

Date: 11-11-25

Note: (fill out this sheet before starting shift)

Equipment #: 342

Equipment Type: 769HQU1

Shift: Night

Machine Hours: 32436

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             |              | X                |
| 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: Heater fan needs work.

Operator's Signature: Jacob [Signature]

Supervisor's Signature: [Signature]

Mechanic's Remarks:

Mechanic's Signature:

Date: