

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 1241

Date 12-4-25

Equipment Type FSSO

Shift Day

Machine Hours 36719

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

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	N/A
Transmission Oil Level/Leaks	✓
Fuel Level	✓
DEF Level	N/A
Water Level	N/A

OPERATOR REMARKS:

Braking Break not holding, ~~brake pads worn~~

Scott Wilson
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 # 1196

Date 12-4-25

Equipment Type 336

Shift Day

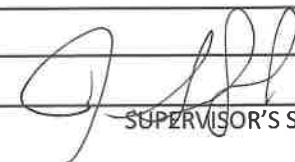
Machine Hours 11551

Codes:	OK	Repairs Made	Repairs Required
	✓	0	X

Excessive oil or hydraulic Leaks	✓
Backup Alarm	✓
Brakes:Foot	N/A
Brakes: Parking	N/A
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	✓
Steps	✓
Safety Guards	✓
Pin Conditions (If Applicable)	✓
Mirrors	✓
Heating/Air Conditioner Working	✓
Wheel Chocks	N/A
Seat Belts	✓
Tires/Wheels	N/A
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	✓

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 # 1223

Date 12-4-25

Equipment Type INT

Shift DAY

Machine Hours 8370


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

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

OPERATOR REMARKS:

1223.1 530.90


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 # 862

Date 12-4-25

Equipment Type Backhoe

Shift DAY

Machine Hours 10537

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

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:

Scott W. Ward 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 # 1231

Date 12-4-25

Equipment Type Epiroc

Shift Day

Machine Hours 9297.7

	OK	Repairs Made	Repairs Required
Codes:	<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"/>

OPERATOR REMARKS:

1231.1 125K: 02 Seat is Bad

B. Scott Nelson
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

Date 12-4-25

Equipment Type JLG

Shift Day

Machine Hours 4019

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

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

OPERATOR REMARKS:

John Wood
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 # 1020

Date 12-4-25

Equipment Type Grapple

Shift day

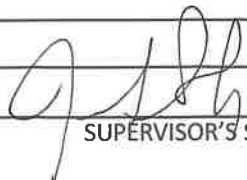
Machine Hours 4656

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)	N/A
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	N/A
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 # 1242

Date 12-4-25

Equipment Type F350

Shift day

Machine Hours _____

	OK	Repairs Made	Repairs Required
Codes:	✓	0	X

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

OPERATOR REMARKS:

Miles- 106,777 left high Beam out

J Wood
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 # 1275
Equipment Type Sandvik Drill
Shift DAY
Machine Hours 3723

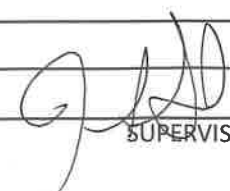
Date 12-4-25

	OK	Repairs Made	Repairs Required
Codes:	✓	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:

 OPERATOR'S SIGNATURE

 SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

1275.1 Hammer 1315

1275.2 Compressor 3724

MECHANIC'S SIGNATURE

DATE

EQUIPMENT OPERATOR'S PRE-SHIFT SAFETY CHECK LIST

Note:(fill out this sheet before starting shift)

Equipment # 343

Date 12-4-25

Equipment Type 15700

Shift Day

Machine Hours 6707

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

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

OPERATOR REMARKS:

Left Singal light Are not working Right headlight out

[Signature] OPERATOR'S SIGNATURE *[Signature]* SUPERVISOR'S SIGNATURE

MECHANICS REMARKS:

MECHANIC'S SIGNATURE

DATE