



FORKLIFTS & INDUSTRIAL TOOLS

Company Name: _____ Facility Address: _____

Manager/Supervisor: _____ Date/Time: _____

Inspector(s): _____

| Yes | No | N/A | Corr Date | Area Inspected |
|-----|----|-----|-----------|---|
| | | | | <ol style="list-style-type: none"> 1. Only trained personnel allowed to operate industrial trucks? 2. Substantial overhead protective equipment provided on high lift rider equipment? 3. Required lift truck operating rules posted and enforced? 4. Directional lighting provided on each industrial truck that operates in an area with less than 2 foot candles per square foot of general lighting? 5. Industrial truck have a warning horn, whistle, gong, or other device which can be clearly heard above the normal noise in the areas where operated? 6. Brakes on each industrial truck capable of bringing the vehicle to a complete and safe stop when fully loaded? 7. Industrial trucks parking brake effectively prevent the vehicle from moving when unattended? 8. Industrial trucks operating in areas where flammable gases or vapors, or combustible dust or ignitable fibers may be present in the atmosphere, approved for such locations? 9. Drive motor shutoff and brakes applied when |

Date _____