



Forklift Daily Checklist



Forklift Number: _____

Inspector: _____

Date: _____

Please note each item as either Acceptable, Not Acceptable, or Not Applicable.

Engine

Crankcase Oil	_____	Wires	_____
Belts	_____	Fuel Line	_____

Components

Fuel Tank	_____	Brake Fluid	_____
LPG Tank Straps	_____	Hydraulic Fluid	_____
Temperature Gauge	_____	Hydraulic Lines	_____
Hour Gauge	_____	Tires, Wheels, Rims	_____
Speed Gauge	_____	Forks	_____
Battery Gauge	_____	Mast Chains	_____

Body

Headlights	_____	Fire Extinguisher	_____
Taillights	_____	Guardrails/Safety Chains	_____
Signal Lights	_____	Operating Instructions	_____
Warning Lights	_____	Lifting Capacity	_____
Seat	_____	Overhead Cage	_____
Seatbelt	_____		

Operational

Horn	_____	Transmission	_____
Backup Warning Device	_____	Adjusted Seat	_____
Steering	_____	Seat Safety Switch	_____
Parking Brake	_____	Mast Lift Up/Down	_____
Service Brake	_____	Mast Tilt	_____
Gear Shift Lever/Switch	_____	Mast Side/Squeeze	_____

Comments

Signature of Inspector: _____