

Attachment 1 - Articulating Boom Lift Pre-Operation Inspection

WEAR FALL PROTECTION WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor



Lift MFG _____ Model _____ Serial _____
 Date _____ Start Time _____

KEY OFF Procedures	Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.			
Check Hydraulic cylinders/Lifting mechanism/Fluid level			
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects			
Check drive hubs, engine for oil leaks			
Check platform entry mid-rail/gate, and platform or basket housekeeping			
Examine the battery & fire extinguisher			
Check fuel level to assure that the unit can operate the duration of the job			
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly			
Tires/Rollers/Monitor tire air pressure if pneumatic			
Front Right psi <input type="text"/> Front Left psi <input type="text"/> Right Rear psi <input type="text"/> Left Rear psi <input type="text"/>			

KEY ON Procedures	Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life)			
Check all basket controls, foot switch, horn for proper operation			
Battery discharge indicator, Hour meter			
Steering and drive system			
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket)			

Starting Hour Meter Reading	Operator's Printed Name	Operator's Signature
DATE	Supervisor's Printed Name (If marked FAIL)	Supervisor's Signature

Attachment 2 - Elevating Work Platform Pre-Operation Inspection



FALL PROTECTION RECOMMENDED WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor

Lift MFG _____ Model _____ Serial _____
 Date _____ Start Time _____

KEY OFF Procedures								Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.										
Check Hydraulic cylinders/Lifting mechanism/Fluid level										
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects										
Check outriggers, outrigger limiting switches, and locking pins										
Check platform entry mid-rail/gate, and platform or basket housekeeping										
Examine the battery & fire extinguisher										
Check battery level to assure that the unit can operate the duration of the job										
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly										
Tires/Rollers/Monitor tire air pressure if pneumatic										
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi				
KEY ON Procedures								Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life)										
Check all basket controls, foot switch, horn for proper operation										
Battery discharge indicator, Hour meter										
Steering and drive system										
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket)										
Starting Hour Meter Reading		Operator's Printed Name				Operator's Signature				
DATE		Supervisor's Printed Name (If marked FAIL)				Supervisor's Signature				

Attachment 3 - Lift Pod Pre-operation Inspection



FALL PROTECTION RECOMMENDED WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location.

All forms must be approved/signed by supervisor

Lift MFG _____ Model _____ Serial# _____
 Date _____ Start Time _____

KEY OFF Procedures							Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.									
Check Hydraulic cylinders/Lifting mechanism/Fluid level.									
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects.									
Check outriggers, outrigger limiting switches, and locking pins.									
Check platform entry mid-rail/gate, and platform or basket housekeeping.									
Examine the battery & fire extinguisher.									
Check battery level to assure that the unit can operate the duration of the job									
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly.									
Tires/Rollers/Monitor tire air pressure if pneumatic.									
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi			
KEY ON Procedures							Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life)									
Check all basket controls, foot switch, horn for proper operation									
Battery discharge indicator, Hour meter									
Steering and drive system									
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket)									
Starting Hour Meter Reading	Operator's Printed Name				Operator's Signature				
DATE	Supervisor's Printed Name (If marked FAIL)				Supervisor's Signature				

Attachment 4 - Extensible Boom Platform Pre-Operation Inspection



WEAR FALL PROTECTION WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor

Lift MFG

Model

Serial

Date

Start Time

KEY OFF Procedures								Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.										
Check Hydraulic cylinders/Lifting mechanism/Fluid level.										
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects.										
Check drive hubs, engine for oil leaks.										
Check platform entry mid-rail/gate, and platform or basket housekeeping.										
Examine the battery & fire extinguisher.										
Check fuel level to assure that the unit can operate the duration of the job.										
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly.										
Tires/Rollers/Monitor tire air pressure if pneumatic.										
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi				
KEY ON Procedures								Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life).										
Check all basket controls, foot switch, horn for proper operation.										
Battery discharge indicator, Hour meter.										
Steering and drive system.										
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket).										
Check outriggers for proper operation if equipped.										
Starting Hour Meter Reading		Operator's Printed Name				Operator's Signature				
DATE		Supervisor's Printed Name (If marked FAIL)				Supervisor's Signature				

Attachment 5 - Scissors Platform Lift Pre-operation Inspection



FALL PROTECTION RECOMMENDED WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor

Lift MFG

Model

Serial

Date

Start Time

KEY OFF Procedures								Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.										
Check Hydraulic cylinders/Lifting mechanism/Fluid level.										
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects.										
Check outriggers, outrigger limiting switches, and locking pins.										
Check platform entry mid-rail/gate, and platform or basket housekeeping.										
Examine the battery & fire extinguisher.										
Check battery level to assure that the unit can operate the duration of the job										
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly.										
Tires/Rollers/Monitor tire air pressure if pneumatic.										
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi				
KEY ON Procedures								Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life).										
Check all basket controls, foot switch, horn for proper operation.										
Battery discharge indicator, Hour meter.										
Steering and drive system										
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket).										
Starting Hour Meter Reading	Operator's Printed Name				Operator's Signature					
DATE	Supervisor's Printed Name (If marked FAIL)				Supervisor's Signature					

Attachment 6 - Trailer Mounted Aerial Lift Pre-operation Inspection

WEAR FALL PROTECTION WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor.



Lift MFG _____ Model _____ Serial _____
 Date _____ Start Time _____

KEY OFF Procedures						Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.								
Check Hydraulic cylinders/Lifting mechanism/Fluid level.								
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects.								
Check outriggers, outrigger limiting switches, and locking pins.								
Check platform entry mid-rail/gate, and platform or basket housekeeping.								
Examine the battery & fire extinguisher.								
Check battery level to assure that the unit can operate the duration of the job.								
Check trailer lights, reflectors, parking brake, axle components, surge brake, safety chains.								
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly.								
Tires/Rollers/Monitor tire air pressure if pneumatic.								
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi		
KEY ON Procedures						Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life).								
Check all basket controls, foot switch, horn for proper operation.								
Battery discharge indicator, Hour meter.								
Steering and drive system.								
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket).								
Check outriggers for proper operation if equipped.								
Starting Hour Meter Reading	Operator's Printed Name				Operator's Signature			
DATE	Supervisor's Printed Name (If marked FAIL)				Supervisor's Signature			

Attachment 7 - Vehicle Mounted Lift Pre-operation Inspection

WEAR FALL PROTECTION WHEN USING THIS LIFT

Instructions: Operators must check off each item as being *OK (PASS)* and safe to use during daily operation. *FAIL* must be signed off by supervisor or removed/tagged Out of Service. Complete an Inspection and Site Hazard Assessment for every new location. All forms must be approved/signed by supervisor.



Lift MFG _____ Model _____ Serial# _____
 Date _____ Start Time _____

KEY OFF Procedures							Pass	Fail	N/A
Check that the operator's manual and decals are in place and legible, and that the operator has reviewed the manual and is aware of its limitations.									
Check Hydraulic cylinders/Lifting mechanism/Fluid level.									
Check welds, pins, missing nuts or bolts and other structural parts for cracks or defects.									
Check outriggers, outrigger limiting switches, and locking pins.									
Check platform entry mid-rail/gate, and platform or basket housekeeping.									
Examine the battery & fire extinguisher.									
Check battery level to assure that the unit can operate the duration of the job.									
Check lights, reflectors, parking brake.									
Operator is responsible for inspecting all fall protection and ensuring that all fall protection is being worn and attached properly.									
Monitor tire air pressure.									
Front Right psi		Front Left psi		Right Rear psi		Left Rear psi			
KEY ON Procedures							Pass	Fail	N/A
Check all ground controls for proper operation, including emergency lowering means (remember, these could save your life).									
Check all basket controls, foot switch, horn for proper operation.									
Battery discharge indicator, Hour meter.									
Steering and drive system.									
Check limit switches, alarms, and flashing beacon if equipped (operating the lift by raising/swing/extending booms, tilt/rotate the basket).									
Check outriggers, leveling jacks and foot pads.									
Starting Hour Meter Reading	Operator's Printed Name					Operator's Signature			
DATE	Supervisor's Printed Name (If marked FAIL)					Supervisor's Signature			

Attachment 8 – Site Hazard Assessment

Instructions: An Operator must conduct a Site Hazard Assessment for Mobile Elevating Work Platform (MEWP) Equipment owned/operated or rented by their department to identify all hazards in the area of intended work, and to select appropriate equipment for the work-task. A site must be reassessed when the site or conditions change.

Department/Shop: _____ Date: _____

Work Site Location: _____

Type of Work to be conducted: _____

Site Evaluation	YES	NO	N/A
Is the work surface structurally strong enough to handle the lift, and free of drop-offs?			
Are surface conditions where the lift is used free of obstructions and on level surface?			
Are there proper barricades to control pedestrian and vehicle traffic in the work zone?			
Are there overhead obstructions or restricted places where the lift will be operated?			
Will the basket handle the loads to be carried without exceeding the rated capacity?			
Are there ramps and other sloped surfaces that could affect the vehicle's stability?			
Will the lift be used for electrical work or near high voltage lines?			
Are there <i>Classified Hazardous</i> locations where the vehicle will be operated?			
Is there an enclosed environment(s) or other areas where insufficient ventilation or poor vehicle maintenance could cause a build-up of carbon monoxide or diesel exhaust buildup for combustion motors, or hydrogen gas buildup at electric vehicle recharging stations?			
Is wind or other weather a concern? Are there sustained winds or gusts stronger than the manufacturer's rated design allowance?			
List below other potentially hazardous site-conditions that could affect safe operation:			
Process/Use of Lift Truck	YES	NO	N/A
Has the proper Lift been chosen for the type of work being conducted?			
Does the Lift have the proper lift height and capacity for the job?			
Are proper PPE (hardhats, etc.) and full body harnesses w/lanyards available and used?			
Is the basket free of trip hazards and proper housekeeping maintained?			
Are there designated parking areas for Lift(s)? (Clear of exits, fire extinguishers, hydrants, pedestrian-aisles, doorways, footpaths, or electrical panels.)			
Is the fueling and/or charging area well ventilated?			
Is there proper lighting in the areas the Lift is being used?			
Are propane bottles being kept in a secure area, and are they tagged <i>Full</i> or <i>Empty</i> ?			
List below other potentially hazardous process-conditions that could affect safe operation:			

Evaluator Name and Signature	Date
Supervisor Name and Signature	Date