



# Mobile Elevated Work Platform

## Pre-Use Inspection Checklist

Equipment Make / Model / ID #	Date
Equipment Type: Scissor Lift _____ Boom Lift _____	Operator / Inspector:
Parking Location Building:	Department / Owner:

1. Safety Precautions	OK	NG	NA	2. Operational Check	OK	NG	NA
Windy conditions – less than 20 to 25 MPH (Less than manufacturers guidelines)				Horn			
Personal Protective Equipment (Head, eye, hand, vest, foot protection)				Gauges			
Pedestrian Traffic Control – Barriers, Tape, Signs				Brakes			
Wheel Chocks and/or Brakes				Lights			
Working Surfaces - Level				Steering			
Power Lines Overhead/Electrical Hazard Source				Attachments or Accessories			
Load Limits				Backup Alarm or Warning Device			
Outriggers				Warning Lights			
Other hazards to consider				Other operational checks			
3. Vehicle Inspection	OK	NG	NA	4. Platform Lift Inspection	OK	NG	NA
Oil Level				Lift and Travel Control Switches			
Hydraulic Oil Level				Placards, Decals and Control ID Labels			
Fuel Level				Handrails, Guardrails, and Gate			
Fluid Leaks				Platform Deck and Toe boards			
Coolant Level				Other:			
Tire Pressure and Tire / Wheel Condition							
Battery and Charger							
Ground Control Switches							
Other							
<b>Comments&gt;&gt;&gt;</b>							
<b>Operator/ Inspector Signature&gt;&gt;&gt;</b>							

If the aerial lift fails any part of this inspection, remove the key and report the problem to your supervisor. Do not attempt to make repairs unless you are a trained and authorized service person.

**MAINTAIN THIS INSPECTION RECORD FOR ONE (1) YEAR.**