



Bulldozer Pre-Trip Inspection Report

(INSTRUCTIONS: All boxes are to be checked for response, click to initiate check mark if N/A or discrepancies leave blank fill in comments)

Department: _____	Date: ___/___/___ Time: ___:___ Am <input type="checkbox"/> Pm <input type="checkbox"/>
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Equipment serial #: _____ Hours: _____	Inspected By: _____
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- Mark **every** box below. Leave blank if it requires attention or is less than ideal. Mark if it meets County Standards.

Fluids:

- Check Oil
- Check Transmission Fluid
- Check All filters/Fuel/Oil/Transmission/Hydraulic
- Check Hydraulic Fluid
- Check Radiator/ Antifreeze level
- Check DEF Fluid if equipped

Electrical:

- Check Lighting Systems Condition
- Check Interior lighting/Gauges etc.
- Check Reverse Alarm/Back up Signal
- Check Head lights/ Tail lights
- Check Tail lights/Spot Lights
- Check Battery Connections/ Condition

Brakes:

- Check Foot Brake
- Check Trenching Brake function and working Condition.
- Check Parking brakes

Transmission:

- Check clutch noise and function
- Check Transmission noise and function
- Check Shift lever function/condition
- Check Hydraulic cylinders
- Check Lift
- Check Tilt
- Check Angle
- Check Ripper

Chassie and Components:

- Check Under Carriage Appearance
- Check Right side drive Sprockets/Link/Bush/Shoe
- Check Left side drive Sprockets/Link/Bush/Shoe
- Check Right side front IDLER Upper/Lower Rollers
- Check Left side front IDLER Upper/Lower Rollers
- Check Track Condition
- Check Duo- cone Seals
- Check After Cooler
- Check Pivot Shaft Reservoir

Operation:

- Check Forward-Steer/Brake/Clutch
- Check Reverse-Steer/Brake/Clutch

Blade:

- Check Blade edge
- Check Blade overall condition
- Check Ripper blade
- Check Ripper blade overall condition

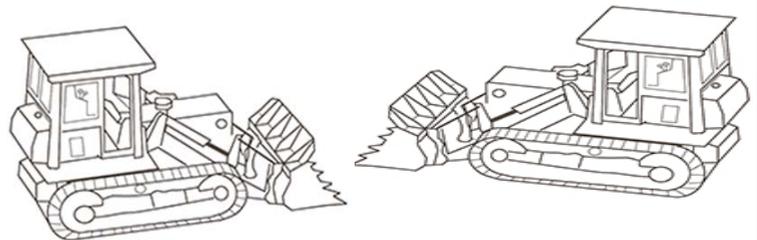
Overall ratings:

- Check Overall Exterior Rating
- Check Overall Quality
- Check Overall Interior Rating
- Check Overall Safety
- Check Overall Performance
- Check Overall Functionality

Walk Around Visual Inspection:

Mark all damage where it is located on the sketch below or using the identifying letter from this key:

- | | |
|----------------------|------------|
| A- Scratch or Scrape | E- Loose |
| B- Broken | F- Flat |
| C- Cracked | G- Missing |
| D- Dented | |



Comments: Auto – Font 350 characters max

Signature of person inspecting equipment _____