

Date: _____ Truck #: _____ Operator: _____
 Start Hour: _____ End Hour: _____ Fuel: _____

INTERNAL COMBUSTION DAILY CHECK LIST

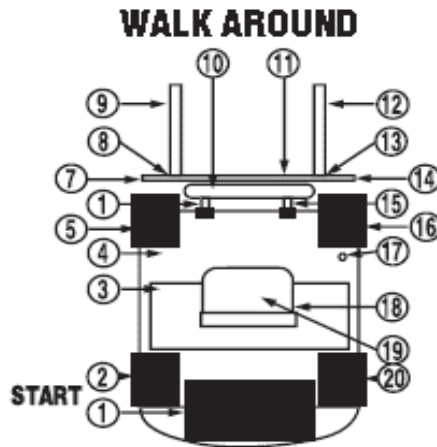
Place **X** where a problem is detected and a **✓** to indicate no problems visible.

Visual Inspection

- 1 Propane _____
 Relief Valve _____
 No Leaks _____
 Fuel Level _____
 Safety Straps _____
- 2 Rear Tire (L) _____
- 3 Engine Compartment _____
 Oil _____
 Radiator _____
 Air Filter _____
 Fan belt _____
- 4 OHG _____
- 5 Front Tire (L) _____
- 6 Tilt Cylinder _____
- 7 Carriage _____
- 8 Fork Locking Pin (L) _____
- 9 Fork (L) _____
 (Attach. Appl.) _____
- 10 Mast _____
- 11 Lift Cylinder _____
 Lift Chains _____
- 12 Fork (R) _____
 (Attach. Appl.) _____
- 13 Fork Locking Pin® _____
- 14 Carriage _____
- 15 Tilt Cylinder _____
- 16 Front Tire (R) _____
- 17 Hydraulic Oil _____
- 18 Battery _____
- 19 Seat & Seat Belt _____
- 20 OHG _____
- 21 Rear Tire (R) _____

Operational Inspection

- A Listen for Unusual Noise _____
- B Check Service & Parking Brake _____
- C Lifting Control _____
- D Tilt Control _____
- E Forward Driving _____
 Accelerator _____
 Steering _____
 Braking _____
- F Reverse Driving _____
 Accelerator _____
 Steering _____
 Braking _____
 Backup Alarm _____
- G Lights _____
- H Horn _____
- I Gauges _____
- J Oil Spots on Floor _____



Signature _____

Date: _____