



## FBP Mobile Crane Pre-Operational Check List

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Equipment:	Capacity:		
Equipment number:	Owner/Lessor		
Date:	Shift:	Day	Night
Operator:			

No	Item	Pass	Fail	Comments
	<b>Pre-Operation Inspection</b>			
1	Perform 360 degree walk around. Check that all operational, instructional and warning decals are legible and that the load chart is posted in an area easily accessible to the operator.			
2	Check engine oil			
3	Check coolant reservoir for proper level			
4	Check hydraulic system for leaks			
5	Check hydraulic oil reservoir for adequate level			
6	Check fuel level for adequate level			
7	Check boom and hoist lines for wear			
8	Grease sheaves as needed			
9	Check tires for proper pressure			
10	Drain water from air tanks			
11	Check LMI set-up and functionality			
12	Check doors and controls for suitable condition and operability. Check cab for cleanliness. Ensure all glass is clean and intact.			
13	Check Hydraulic hoses for wear/damage			
	<b>Power Plant</b>			
1	Start engine and warm up			
2	Check all instruments to ensure that they are working			



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		Pass	Fail	Comments
	<b>Hoisting Mechanism</b>			
1	Check for overhead obstructions			
2	Check ground conditions for suitability			
3	Check ball and/or block, hooks, and safety latches for defects			
4	Set outriggers (Use mats as required)			
5	Verify anti two-block device is operational			
6	Check boom operations: up, down, left, right			
7	Fully extend telescoping boom and retract (check wire rope spooling)s			
8	Verify rope reeving per crane specifications			
	<b>Travel Mechanisms</b>			
1	Test brakes			
2	Back up alarms			
3	Turn signals, lights, horn			
	<b>Equipment</b>			
1	Fire extinguisher			
2	Seat belt (mandatory use when operating)			
3	Check stowed jib attachment hardware			
	<b>Records</b>			
1	Load chart posted in machine			
2	Annual inspection report in machine			
3	Crane Manual in machine			
4	Keep this report in the machine and turn in to supervisor at the end of every shift.			

Inspector signature \_\_\_\_\_ Date \_\_\_\_\_

Supervisor signature \_\_\_\_\_ Date \_\_\_\_\_