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# EXCAVATOR & TRAILER PRE-START CHECKLIST

DATE: / /	LICENCE NUMBER:
MACHINE HOURS:	
COMPANY NAME:	
OPERATOR NAME:	
MACHINE:	YANMAR VIO20 EXCAVATOR
SERIAL NUMBER:	YMRVIO20ETYJ6A100
ENGINE NUMBER:	193489
TRAILER (VIN):	6K9PLATRLTB377078

## 1. EXCAVATOR PRE-START INSPECTION

	OK	NOT OK	N/A
Walk around inspection (damage/leaks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check engine oil level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check coolant level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check hydraulic oil level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check fuel level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check for fuel leaks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check radiator & hoses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check air filter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check tracks / undercarriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check boom, arm & bucket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check pins & bushes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check quick hitch operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check all lights / beacons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check horn / reverse alarm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check seat belt / ROPS / FOPS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check wipers / glass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check gauges / warning lights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check joysticks & controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check parking brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check battery & isolator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check tool box / equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure no loose items in cab or body	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GREASED TODAY

YES  NO

## 2. ATTACHMENTS CHECKLIST (TICK IF FITTED & CHECK CONDITION)

	OK	NOT OK	N/A
Tilting Quick Hitch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
300mm GP Bucket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
450mm GP Bucket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1000mm Mud Bucket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ripper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Auger Drive Unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
300mm Auger Drill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
450mm Auger Drill	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stick Rake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hydraulic Grab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 3. TRAILER PRE-START INSPECTION

	OK	NOT OK	N/A
Tyres - condition & pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wheel nuts - tight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hubs / bearings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electric brakes operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Breakaway system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coupling - secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jockey wheel / stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety chains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lights - all working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Indicators / brakes / clearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reflectors / number plate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ramp / gate operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tie down points	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spare wheel / bracket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General condition / damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 4. FLUID CHECKS

	OK	NOT OK	N/A
Engine oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coolant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hydraulic oil	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Window washer fluid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 5. SAFETY & GENERAL

	OK	NOT OK	N/A
ROPS / FOPS in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seat belt in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid kit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
UHF radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean & free of debris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Service book on board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## FAULTS / DEFECTS

### DETAILS:

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## 6. ACTION TAKEN / CORRECTIVE ACTION

DETAILS:

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I confirm the above pre-start check has been completed and the machine and trailer are safe to operate.

OPERATOR SIGNATURE: \_\_\_\_\_ TIME: \_\_\_\_\_ AM / PM

SUPERVISOR SIGNATURE (IF REQUIRED): \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_