

Crane name/number	Crane Type	Crane Capacity	Date of inspection:
Location _____	Hour Meter: start: stop:	Total Hours Operated _____	
Operator Name:			

DAILY INSPECTION: Inspect and mark items as Satisfactory = S, Unsatisfactory = U, or Not Applicable = N/A

Walk Around Inspection	U	S	N/A	Operator Cab Inspection	U	S	N/A
Safety guards, and pads				Gauges			
Carrier frame, rotate base				Warning & Indicator lights			
Wire rope				Control / brakes			
General Hardware				Visibility			
Reeving				Load rating charts			
Block				Safety devices			
Hook				Emergency stops			
Sheeves				Last/trim indicators			
Boom / Jib				Crane model/number			
Gantry, pendants, boom stops				Machinery House Inspection	U	S	N/A
Walks, ladders, handrails				Housekeeping			
Wind locks, chocks, stops				Engine / Compressor			
Tires, wheels, tracks				Leaks - Fuel, lube, Oil, Water			
Leaks-Fuel, oil, lub, water				Lubrication			
Radius indicator				Batter			
Outrigger/locking device				Lights			
Operational Inspection	U	S	N/A	Glass			
Area safety				Clutch/Brake linings			
Unusual noises				Electric motors			
Control action				Warning tags			
Brakes / boom / load / rotate				Fire Extinguisher			
Crane stability				Comments:			
No load test							
Fleeting sheeve							
Limit switches							



Operator Signature	Supervisor Signature
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