


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

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

<b>Walk Around Inspection</b>	<b>Notes</b>	<b>U</b>	<b>S</b>	<b>N/A</b>
Control Mechanisms				
Control and drive mechanisms				
Air, hydraulic, and other pressurized lines				
Hydraulic system fluid level				
Hooks and latches				
Wire rope				
Reeving				
Electrical apparatus				
Tires				
Ground conditions				
Equipment level				
Operator cab windows				
Rails, stops, rail clamps				
Safety devices and operational aids				
<b>Comments:</b>				

<b>Operator Signature</b>	<b>Supervisor Signature</b>
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