

PLANT DAILY INSPECTION – FAULT REPORT SF-25

Project/Job No.:	Week Ending Friday:
Plant Type:	Hours/Kms Ending Friday:
Plant No.:	Reg No.:

NOTE: Operators to check the following items before commencing work. These records form the basis of a Plant Maintenance Procedure and will be subject to random inspection. Keep the record with you/with the plant at all times.

Please mark the boxes either:

[✓] **OK** No obvious defect [X] **Fault Identified** (Use Fault/Defect Report below) [NA] **Item Not Applicable to this Plant**

Before commencing operations check the following:	Sat	Sun	Mon	Tue	Wed	Thu	Fri
1. GENERAL: brakes, steering, gauges, lights, warning devices							
2. VISIBILITY: windscreen, wipers, washer, demister, mirrors, windows - CLEAN							
3. CABIN: access/egress, seating, seatbelts, loose objects, control levers – CLEAN & TIDY							
4. WHEELS: tyres, nuts, damage, wear, tread, pressure (visual)							
5. GUARDS: in place, secure, clean, etc.							
6. WARNING SIGNS: lights, alarms, decals							
7. HYDRAULICS: rams, hoses, leaks, wear							
8. EXCESSIVE WEAR: hooks, chains, pins, pivots, tracks							
9. CUTTING EDGES: wear plates, teeth etc							
10. FLUIDS: oil and coolant levels, water, fuel etc.							
11. GREASE: all grease points							
12. AIR FILTER: check and CLEAN							
13. SAFETY PIN: inserted							
14. MISCELLANEOUS: electrical, fire extinguisher, communications, etc.							
Operator's Name: <i>(Please Print)</i>				Operator's Signature:			

PLANT FAULT/DEFECT REPORT

Complete this Section to report any fault or defect identified during Daily Plant Safety Checks or during work operations

Reported by:	Reported to:
Position:	Position:
Date:	
Method of Reporting: <input type="checkbox"/> Telephone <input type="checkbox"/> In Person <input type="checkbox"/> Radio	
Details of fault/defect:	

SUPERVISOR

Does the fault/defect constitute a safety hazard?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, tag out the machine and advise Plant and Project Manager
Does machine require immediate reporting to Plant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, advise Plant and Project Manager
Does the fault/defect require attention in next few days?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the fault/defect require attention at next service?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Supervisor's Name: <i>(Please Print)</i>		Supervisor's Signature:	

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