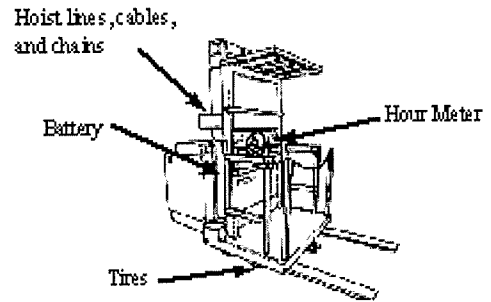


**POWERED INDUSTRIAL TRUCK INSPECTION CHECKLIST  
ORDER PICKER**

Order Picker

**TRUCK NO:** \_\_\_\_\_

**Hour meter Reading:** \_\_\_\_\_



Check each item	Condition		Explain below if not OK
	OK	Not OK	
<b>KEY OFF PROCEDURES</b>			
Hoist lines, cables and chains			
Hour meter			
Tires			
Battery cables			
Limiting device			
<b>KEY ON PROCEDURES</b>			
Battery discharge indicator			
Safety interlock			
Steering			
Brakes			
Lights			
Horns			
Gripper jaws			
Work platform			

**Additional Remarks:**

\_\_\_\_\_

\_\_\_\_\_

**Inspected by:** \_\_\_\_\_

**Date:** \_\_\_\_\_