



LOADER \ BACKHOE CHECKLIST

To Be Completed by a trained operator.

Make: _____ Model: _____ REGO/NO: _____

Loader Lifting Capacity: _____

WARNING! Do not operate machine if not safe to operate!
If ANY are ticked N for NON-COMPLIANT, Tag out machine and refer this sheet

Visual check of the machine		Conducted with the engine off.		Y	N
Data plate/Load rating plate	Fitted & Readable	<input type="checkbox"/>	<input type="checkbox"/>		
Warning decals	Readable	<input type="checkbox"/>	<input type="checkbox"/>		
Lift Arms, Boom and Dipper	Lubricated & No Damage	<input type="checkbox"/>	<input type="checkbox"/>		
Bucket & Backhoe Pins/Pivots	Lubricated, clips/keepers, No damage.	<input type="checkbox"/>	<input type="checkbox"/>		
Stabilisers & Backhoe Slide	Lubricated, no damage.	<input type="checkbox"/>	<input type="checkbox"/>		
Hydraulics	No Leaks or Damage	<input type="checkbox"/>	<input type="checkbox"/>		
ROPS/FOPS	Secure & Good Condition	<input type="checkbox"/>	<input type="checkbox"/>		
Wheels & Tyres	Pressure/Damage/ Nuts/ Studs Secure.	<input type="checkbox"/>	<input type="checkbox"/>		
Fluid Leaks	No Fluid Leaks under Machine	<input type="checkbox"/>	<input type="checkbox"/>		
Fuel	Level enough for day	<input type="checkbox"/>	<input type="checkbox"/>		
Engine Oil	Level Correct	<input type="checkbox"/>	<input type="checkbox"/>		
Hydraulic and Transmission Oil	Level Correct	<input type="checkbox"/>	<input type="checkbox"/>		
Coolant	Level Correct for Temperature	<input type="checkbox"/>	<input type="checkbox"/>		
Battery	Secure & Clean, Electrolyte Level OK	<input type="checkbox"/>	<input type="checkbox"/>		
Cleanliness	Windows, Cab, Pedals & controls.	<input type="checkbox"/>	<input type="checkbox"/>		
Seat	Rotates. Engages controls	<input type="checkbox"/>	<input type="checkbox"/>		
Seat Belt	Good Condition & Functional	<input type="checkbox"/>	<input type="checkbox"/>		
Engine	Starts run smoothly	<input type="checkbox"/>	<input type="checkbox"/>		
Horn	Operation & Volume	<input type="checkbox"/>	<input type="checkbox"/>		

Function Checks		Conducted with the engine running		Y	N
Loader Lift Arms	Extends to full height	<input type="checkbox"/>	<input type="checkbox"/>		
Loader Bucket	Tilts/Crowd/Clam operation.	<input type="checkbox"/>	<input type="checkbox"/>		
Backhoe Stabilisers /Slide	Side shift & Stabilisers operation	<input type="checkbox"/>	<input type="checkbox"/>		
Backhoe Arm	Boom, Dipper function	<input type="checkbox"/>	<input type="checkbox"/>		
Hand Controls	All controls operate correctly	<input type="checkbox"/>	<input type="checkbox"/>		
Foot Pedals	Not fouled. Clean. Operate Correctly.	<input type="checkbox"/>	<input type="checkbox"/>		
Moving Parts	No unusual noise	<input type="checkbox"/>	<input type="checkbox"/>		
Control Panel	Lights/Gauges/Warning indicators	<input type="checkbox"/>	<input type="checkbox"/>		
Rotating Beacon & Lights	Rotates & Visible	<input type="checkbox"/>	<input type="checkbox"/>		
Lights	Working /Spot/Driving Lights	<input type="checkbox"/>	<input type="checkbox"/>		
Reversing Beeper	Operates in Reverse	<input type="checkbox"/>	<input type="checkbox"/>		
Park Brake	Hold Machine on incline.	<input type="checkbox"/>	<input type="checkbox"/>		
Hydraulic Lockout (if fitted)	Locks controls & Hydraulics.	<input type="checkbox"/>	<input type="checkbox"/>		
Driving Inspection		Conducted driving in circle/figure 8		Y	N
Steering	Steers well. No undue noise/stress	<input type="checkbox"/>	<input type="checkbox"/>		
Creep	No creeping when controls neutralized.	<input type="checkbox"/>	<input type="checkbox"/>		
Model-Specific Checks		Cross out if not applicable		Y	N
Attachment Security	Attachment Secure & Pins Secure	<input type="checkbox"/>	<input type="checkbox"/>		
Attachment Damage	Attachment not damaged	<input type="checkbox"/>	<input type="checkbox"/>		
Ground-Engaging Equip	Teeth/Cutting Edges/loose or worn.	<input type="checkbox"/>	<input type="checkbox"/>		

Faults Identified: _____

Maintenance Required/Administered: _____

Operator/Inspector Name: _____ Signature: _____ Date: _____ Hours Start: _____

Finish: _____