

Objective: To verify mobile plant is serviceable and meets statutory requirements for safe use and operation.

Instructions for use: Supplier completes for any mobile plant hired by Oscon. Subcontractors complete this form and handover to Oscon Site Manager where they do not have an equivalent system in place to show the mobile plant has been inspected before use and meets statutory requirements for safe use and operation.

Mobile Plant Supplier:	Phone:
Sub-Contractor or Hirer:	Phone:
Machinery Type:	Date on site:
Model:	Registration / Id No:
Last Programmed Service Date: Kms./Hours:	Next Service Due:

No.	Item	Acceptable			Comment
		Yes (✓)	No (✓)	Not Applicable (N/A)	
1.0	General Condition:				
1.1	Cabin Protection.				
1.2	Are there any Structural cracks				
1.3	Safety guards fitted.				
1.4	Access ladders and steps.				
1.5	Fire Extinguisher fitted and tags current.				
1.6	Lights (including amber flashing light) operational.				
1.7	Seat belts.				
1.8	Reversing alarm operational.				
1.9	Warning alarms operational (tilt, overload, EWP motion, etc).				
1.10	Tyres – condition and correct pressure.				
2.0	Serviceability:				
2.1	Servicing as per manufacturers recommendations.				
2.2	Driveline components – no leaks				
2.3	Hydraulic system – no leaks				
2.4	Brakes – operation and controls.				
3.0	Cranes and Lifting Equipment:				
3.1	Registration Certificates available in unit.				
3.2	Maintenance records available in unit.				
3.3	SWL limits marked.				
3.4	Lifting gear (Chains, slings, shackles, etc.) has been checked and have current certification				
3.5	Lifting indicators (angle, boom length and load) have been checked.				

Declaration - I declare that the Mobile Plant/ Equipment is serviceable and meets statutory requirements for safe use and operation.

Contractor Representative's name:..... Contractor Representative's Signature:.....

Items to be verified by Oscon Representative: - To be checked on site arrival

No.	Item	Acceptable			Comment
		Yes	No	N/A	
4.0	General				
4.1	Flashing light operational.				
4.2	Reversing alarm operational.				
4.3	Certificates of registration/ certification sighted.				

Oscon Representative name:..... Signature:.....

Author:	ANTON SMITH	To Be Reviewed:	OCTOBER 2012
Approved by:		Print Date:	OCTOBER 2012