

Walkie-Stacker Daily Shift Checklist

Instructions: PLACE **Y** for passing **N** for failing in the appropriate box. Fill in the date and Serial number at the top left. Operators **MUST** fill out the AM pre and post-shift and PM pre and post-shift section for every shift and sign each shift section at the bottom of each column.

Note- If the Stacker is not used on a Morning or Afternoon shift, The Manager on Duty is responsible for the completion of said shift.

IMPORTANT: Wear Safety PPE (Goggles, Gloves, etc.) when inspecting the unit, no exceptions.

DATE: ___ / ___ / ___ SERIAL # _____	AM SHIFT	PM SHIFT
KEYPAD/CONTROL PAD	PRE	POST
No visible defects?	<input type="checkbox"/>	<input type="checkbox"/>
Switch works as designed?	<input type="checkbox"/>	<input type="checkbox"/>
TIRES/TREAD	PRE	POST
No gouges, chunking, or flats?	<input type="checkbox"/>	<input type="checkbox"/>
Adequate tread. (if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>
BATTERY	PRE	POST
Fully charged and at correct voltage?	<input type="checkbox"/>	<input type="checkbox"/>
Properly installed/connected?	<input type="checkbox"/>	<input type="checkbox"/>
Emergency disconnect works?	<input type="checkbox"/>	<input type="checkbox"/>
LIFT SYSTEM	PRE	POST
No damage, hose, limit switches?	<input type="checkbox"/>	<input type="checkbox"/>
CONTROLS	PRE	POST
They move smoothly, no binding?	<input type="checkbox"/>	<input type="checkbox"/>
Returns to neutral when released?	<input type="checkbox"/>	<input type="checkbox"/>
BRAKE	PRE	POST
Handle moves freely without binding?	<input type="checkbox"/>	<input type="checkbox"/>
Unit stops in specified distance?	<input type="checkbox"/>	<input type="checkbox"/>
GENERAL SAFETY	PRE	POST
Guards/covers installed & secure?	<input type="checkbox"/>	<input type="checkbox"/>
Decals & warnings in place?	<input type="checkbox"/>	<input type="checkbox"/>
Unit free of any leakage?	<input type="checkbox"/>	<input type="checkbox"/>
All mechanics & frame in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
Limit features & switches working?	<input type="checkbox"/>	<input type="checkbox"/>
Audio & Visual indicators working?	<input type="checkbox"/>	<input type="checkbox"/>
Travel & lift stop on battery disconnect?	<input type="checkbox"/>	<input type="checkbox"/>
Horn works correctly?	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Cord in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
Forks are not worn more than 10%?	<input type="checkbox"/>	<input type="checkbox"/>
Chain is taught?	<input type="checkbox"/>	<input type="checkbox"/>

AM SHIFT	
_____ Print Name:	_____ SIGN:
PM SHIFT	
_____ Print Name:	_____ SIGN: