



Frequent/Periodic/Annual/PDI Checklist

Vertical Mast, Electric Scissor, Micro Scissor & Rough Terrain

Serial Number: Starting with serial number A/B/C000 000 000 or 09 000 000 and above

Product Owner: _____

Model: _____

Product User: _____

Hourmeter Reading: _____

Date/Time: _____

Inspection Type (Choose one): Pre-delivery Frequent Periodic Annual

Use this table for pre-delivery inspections (PDI) before each rental, lease or sale and as an instruction for all frequent inspections and annual inspections. Refer to the operation and service manuals for inspection instructions (for example, visual inspection and function tests, torque specs, engine oil, chain inspection intervals, and more).

Inspection Type Schedule	
PDI/Frequent/Periodic	B
Annual	B+C

B - Do the pre-delivery inspection before the machine is sent out or during the frequent inspections at 200 days or 200 hour intervals. For more instructions, refer to the operation and service manuals.

P - Pass
N/A - Not Applicable

C - Do the scheduled maintenance Inspections each year. For more instructions, refer to the operation and service manuals.

Put a check mark on the "Pass" column as you meet the requirements of the inspection of each item. Add a comment if the item does not pass inspection.

Items for Inspection	P	N/A
Service Bulletins. Make sure there are no open service bulletins.	B	
Annual Inspection. Make sure you complete it within 13 months.	B	
Labels. In place, correctly attached & you can read them.	B	
Limit Switches. Correctly installed & no obstructions or damage.	B	
BASE/ENGINE		
Engine and Components. Do a check on engine and components for any loose, missing, damaged, or failed items. Make sure you do not exceed the recommended fluid, oil and coolant change intervals.	B	
Engine and Components. Replace the engine oil and filter.	C	
Engine Intake Air Filter. No damage or missing component. Remove dirt & dust.	B	
Engine Intake Air Filter. Replace the air filter if necessary.	C	
Engine Oil. Oil level between "L" and "H". Make sure you do not exceed the oil change interval.	B	
Radiator. Correctly attached & no damage or missing components. Do a check of coolant level.	B	
Radiator. Do a check of coolant level & condition & replace if necessary.	C	
Fuel Tank & Lines. Filler cap, tank, fittings and hoses are tightly closed & no damage or leaks.	B	
Propane Tank & Lines. Straps are correctly installed to brackets & couplers are tight. Make sure there are no damage or leaks.	B	
Outriggers. No damage or missing components.	B	
Pothole Protection. Both sides have no obstructions, dirt or damage.	B	
Battery/Hydraulic Tray. Trays are latched tightly & no missing components.	B	
Batteries. No damage, tight connections & sufficient fluid levels. Clean terminals and cable ends.	B	
Battery Charger. Correctly attached & no damage.	B	
Steer Assembly. Correctly attached & no damage leaks or missing components.	B	
Wheel/Tire Assembly. Do a check of all tires for damage, missing parts, wear & correctly aligned.	B	
Wheel/Tire Assembly. Wheel nuts torqued as recommended.	C	
Axles. Correctly attached & no missing components. Tight fittings and hoses & no leaks.	B	
Axles. Do a check and replace oil if necessary.	C	
Hydraulic Tank, Pump, Motor & Lines. Filler cap, hoses, and other hydraulic components are closed tightly & no damage or leaks.	B	
Hydraulic Oil. Level at, or slightly above top mark.	B	
Hydraulic Oil. Do a check and replace oil and filters if necessary.	C	
Electrical Components. Do a check on all electrical components such as the motor controller if necessary. Correctly attached & no damage. Tight wire connections and fasteners.	B	

Items for Inspection	P	N/A
Manifolds. Tight fittings and hoses & no damage or leaks. Tight wire connections, no missing components & correctly working valves.	B	
Main Power Disconnect Switch. Cables tight & in working order.	B	
Base Controls. Operate switches and make sure they all operate correctly. No damage or missing components.	B	
Brakes. Correctly attached & no damage or leaks.	B	
Brakes. Do a check on disc wear and replace if necessary.	C	
Base Weldment. No deformation or cracks.	B	
Grease Points. No obstructions, dirt, or damage. Add grease if necessary.	B	
Ladder. Correctly attached & no damage.	B	
Tilt Sensor. Correctly attached & no damage.	B	
LIFTING MECHANISM - MAST/SCISSORS		
Maintenance Support(s). Correctly attached & no damage.	B	
Scissor Assembly & Bumpers. Correctly attached, no deformation/damage. Cables & wires installed with no damage.	B	
Sliders & Rollers. Correctly attached & no obstructions, dirt, or damage/wear.	B	
Lift Cylinder(s). No damage or missing components. Tight fittings and hoses & no leaks. Correctly installed.	B	
Height Sensor. Correctly attached & no damage.	B	
Scissor Pins. Correctly attached & no damage.	B	
Mast Assembly. No damage, cracks or deformation.	B	
Mast Assembly. Lubricate the mast as recommended.	C	
Chains, Rollers & Control Cables. No damage or missing components.	B	
Wear Pads. No damage/wear or missing components. Fasteners tight.	B	
PLATFORM		
Railings and Gate. Correctly attached & no damage or missing components.	B	
Fall-Protection Anchorage. Attachment rings correctly attached & no damage.	B	
AC Power Socket. No obstructions, dirt, or damage.	B	
Platform Control Console. Operate the switches and make sure they all operate correctly. No damage or missing components.	B	
Manual Storage Box. Manuals and documents are in storage box, in good condition, and you can read them.	B	
Powered Extension Control Console. Operate switches and make sure they all operate correctly. No damage or missing components.	B	
Extension Platform. Correctly attached & no damage or missing components.	B	
Function Tests. Refer to the operation manual for your serial number for information on how to run these tests.		PASS FAIL

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Comments: _____

The undersigned has made sure that all areas in the list have received an inspection. The undersigned has told the machine owner of all inconsistencies in the inspection and corrected them before machine operation.

Owner: _____ Print Name _____ Signature _____ Date (DD/MM/YY) _____

User: _____ Print Name _____ Signature _____ Date (DD/MM/YY) _____