

Forklift and Warehouse Transport Safety Checklist

Date & Inspector Details

Date	Inspector Name
Location	Forklift ID/Number

Pre-Operation Checks

Item	Pass	Fail	N/A	Comments
Brakes (service and parking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Steering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lights (front, rear, warning)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Horn / Audible Warning Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hydraulic Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Forks and Mast Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Seatbelt / Operator Restraint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tyres/Wheels Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Leaks (oil, hydraulic, battery, fuel)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Operational Safety

Item	Pass	Fail	N/A	Comments
Operator trained & authorized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-use safety inspection completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Loads stable and within rated capacity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safe speeds maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No unauthorized passengers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Seatbelt used at all times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Warehouse Transport Areas

Item	Pass	Fail	N/A	Comments
Clear, unobstructed aisles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sufficient lighting in transport areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Warning signs and markings present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pedestrian walkways clearly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dock areas secure and organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments / Actions Required

Inspector Signature

Date