

Loader Equipment Safety Audit Checklist

Date:

Location:

Auditor Name:

Loader Operator:

Loader Model/ID:

General Condition

Item	Compliant	Non-Compliant	N/A	Comments
Physical condition (no damage, no leaks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Safety Features

Item	Compliant	Non-Compliant	N/A	Comments
Rollover Protective Structure (ROPS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Seat belts functional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Warning labels/signage in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fire extinguisher present & accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Operational Checks

Item	Compliant	Non-Compliant	N/A	Comments
Brakes (service & emergency)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Horn and backup alarm functional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lights and indicators operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mirrors clean and adjusted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Hydraulic & Mechanical Systems

Item	Compliant	Non-Compliant	N/A	Comments
Hydraulic hoses & connections (no leaks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Bucket/blade in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Steering system functional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Other Observations / Notes