

Engine Room Inspection Checklist

General Information

Date	<input type="text"/>
Inspector Name	<input type="text"/>
Vessel Name/ID	<input type="text"/>

Inspection Items

Item	Status	Remarks
Engine oil levels	<input type="checkbox"/>	<input type="text"/>
Coolant levels	<input type="checkbox"/>	<input type="text"/>
Fuel system (lines, leaks)	<input type="checkbox"/>	<input type="text"/>
Belt and pulley condition	<input type="checkbox"/>	<input type="text"/>
Engine mounts	<input type="checkbox"/>	<input type="text"/>
Exhaust system	<input type="checkbox"/>	<input type="text"/>
Bilge condition	<input type="checkbox"/>	<input type="text"/>
Ventilation system	<input type="checkbox"/>	<input type="text"/>
Fire extinguishing equipment	<input type="checkbox"/>	<input type="text"/>
Electrical system (wires, panels)	<input type="checkbox"/>	<input type="text"/>

Additional Notes

Inspector Signature

--