

Heavy Equipment Operation Road Test Report

Operator Information

Name:
Employee ID:
Department:
Test Date:
Equipment Type:
Equipment ID:
Evaluator Name:
Evaluator Title:

Pre-Operation Inspection

Item	Condition	Remarks
Fluid Levels		
Tires/Tracks		
Hydraulic System		
Controls		
Brakes		
Lights/Horn		
Other		

Operation Skills Assessment

Skill	Rating	Remarks
Start Up/Shutdown Procedures		
Movement & Maneuvering		
Control Use		
Load Handling		
Awareness of Surroundings		
Communication/Signals		
Parking/Securing Equipment		

Comments & Recommendations

Evaluation Result

Evaluator Signature

Operator Signature