

Generic Safety Checklist for Carts/Utility Vehicles

A daily vehicle inspection should be conducted using a checklist for each specific type of cart to include all applicable visible and functional items. Use this generic checklist as a guide in developing checklists for your department's specific type of cart(s). Anything noted to be not in proper working order should be reported to the Supervisor and the cart taken out of service until properly repaired.

AUTHORIZATION:

Y N NA

- Have you completed specific cart safety instruction?
- Do you possess a valid Missouri driver's license?

Y N NA

- Do not operate carts/utility vehicles on outside roadways except on marked cross walks.

INSPECTION:

Visible Items

Y N NA

- Are tires inflated to the proper pressure?
- Is rust damage present?
- Are all fluids maintained at the proper levels?
- Is there any evidence of fluid leaks?
- Are there any loose parts?

Functional Aspects

Y N NA

- Is the vehicle steering loose?
- Is the audible reverse alarm operational?
- Are the brakes functioning properly?
- Are the side and rear view mirrors in good condition, e.g., not cracked, fogged, loose, dirty?
- Are operational flashing hazard lights on top of the cart operational?

Y N NA

- Are slow moving vehicle reflective triangles clearly displayed on all carts and trailers in tow by carts?
- Are there any other visibly defective items noted?

Y N NA

- Are seat belts accessible for use and in good condition?
- Is the horn operational?
- Are all signals fully functional?
- Is the battery correctly charged?
- Is all original equipment safety features maintained in good working order as recommended by the manufacturer's service schedule?
- Are records of recommended maintenance and repairs maintained?

SAFE OPERATION:

I have read, understand and follow all information presented under this section in the draft guideline including but not limited to operation restrictions of carts on roadways and sidewalks, speed limits, inclines, use of headsets, seatbelts, operation in buildings, sounding horn at blind turns, maximum weight limits, securing loads, passengers, pedestrians and disabled, parking, etc.

Lastly, report all accidents to your supervisor who will assist in completion of written reports.

Signature: _____ Date: _____