

DAILY TRACK DRILL INSPECTION

UNIT # _____ MAKE _____ HOURS _____ WK END DATE _____

JOB # _____ OPERATOR / INSPECTOR _____

MARK (S) FOR SATISFACTORY MARK (U) FOR UNSATISFACTORY FOR EACH DAY

MON	TUE	WED	THR	FRI		MON	TUE	WED	THR	FRI	
___	___	___	___	___	FLUID LEVELS, BELTS, HOSES	___	___	___	___	___	PRESSUREIZED HOSES
___	___	___	___	___	AIR CLEANER FILTER	___	___	___	___	___	FEED CHAIN
___	___	___	___	___	HYDRAULIC SYSTEM	___	___	___	___	___	AUXILLARY WINCH
___	___	___	___	___	PNEUMATIC SYSTEM	___	___	___	___	___	OIL RESIVOIRS
___	___	___	___	___	EXHAUST SYSTEM	___	___	___	___	___	INNER & OUTER JAWS
___	___	___	___	___	BATTERY	___	___	___	___	___	TRACKS & ROLLERS
___	___	___	___	___	AUXILLARY CRANE & HOOK	___	___	___	___	___	SWIVEL
___	___	___	___	___	FRAME	___	___	___	___	___	ACCUMULATOR
___	___	___	___	___	MAST / TILT SYSTEM	___	___	___	___	___	CONTROLS / GAUGES
___	___	___	___	___	ROTATOR / HAMMER	___	___	___	___	___	DUST COLLECTOR

NOTE ANY REPAIRS OR REPLACED ITEMS BELOW:

SIGNATURE OF INSPECTOR / OPERATOR