

Type of Equipment _____
(Tractor, Lawn Mower, Forklift, Ladder/Backhoe, etc.)

Make _____ Model _____

Serial # _____ New *Used Rental/Lease

* The Used Equipment Safety Checklist (F70-291) should be completed instead of this form when selling, leasing, or renting used equipment and when receiving used equipment on trade-ins.

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(Tractor, Lawn Mower, Forklift, Ladder/Backhoe, etc.)

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Equipment Safety Check

(All questions may not be applicable to all equipment)

	Yes	*No	N/A
1. All guards in place and points of danger protected (PTO, sprockets, pulleys, etc.)? ...	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Instruction booklet provided?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Operating instructions given?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Warning and/or safety decals in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. All users of this equipment will be trained by a competent instructor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Safety shut-offs, kill switches in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. If applicable, safety belts in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Instructions given on proper fueling procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Maintenance schedules have been thoroughly explained and will be followed by customer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Rollover protection system in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If "No" was checked for any of the above questions, or if equipment has been modified or altered, please comment on the back of this card.

Completed By _____ Date _____

Customer Acceptance

I fully understand the above checklist. The dealer and I have read and completed this form and I agree with the above information.

Customer Signature _____ Date _____

Salesperson Name _____ Date _____

Dealer Address _____

Customer Operations _____
(Farming, Private, Maintenance, Landscape, Contractor, etc.)

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Comments (from front)

I answered "No" to question _____ because: _____

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I answered "No" to question _____ because: _____

Modified/Altered Equipment Comments: _____

Sample Form

This sample form is provided as a courtesy. Use of this form may help reduce the risk of loss, but should not be construed as eliminating any or all risk of loss. The material included is not intended to comply with or be a substitute for any state, federal or local laws or regulations. Obtain the advice of independent legal or other business advisors in developing forms and procedures for your business. Since each business situation is unique, this sample document should be reviewed to confirm it meets your specialized circumstances and needs. This form should not be considered tax, legal, or other expert advice.

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