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| **Note: This form should only be used where a John Holland specific Pre-Populated Pre-Acceptance Checklist is not available** [**JH-FRM-PAE-001-01**](http://ims.jhg.com.au/viewdocument.aspx?doc=JH-FRM-PAE-001-01) |
| PROJECT NAME | PROJECT NO |
| **PLANT DETAILS** |
| Description of Plant: | Plant Owner/Supplier: | Plant Rego/Serial Number |
| Plant Make: | Plant Model: | Plant Owner/Supplier: | Licence and /or Design Registration No: |
| Address: | Suburb | Post Code | Telephone No |
| **MINIMUM REQUIREMENTS** (If the minimum requirements are not met, a plant sticker will not be issued and the item of plant is not to commence work) |

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| **Verify** | **Check** | **Requirement** | **Verify** | **Check** | **Requirement** |
|  |  | Operator and Maintenance Manual available |  |  | Plant Hazard Assessment Sighted & Current (within 2 yrs): |
|  |  | Logbook / Service Records (checked ok): |  |  | Plant Hazard Assessment Inspection Date: / /  |
|  |  | Audible Alarm and other Warning Devices fitted, operable and suitable for site conditions |  |  | Daily Prestart Inspection Checklist is available for use. |
|  |  | Fire Extinguisher Fitted and charged |  |  |  |

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| **Verify** | **Check** | **Plant Requirements to be checked (Mandatory)** |
|  |  | Plant has no signs of excessive wear or damage. |
|  |  | Plant logbook in legible English detailing the service history of the plant  |
|  |  | Plant guarding is in place and in good condition  |
|  |  | Access and egress is in good condition, hand holds, ladder etc. are sound and in place. |
|  |  | Operator seating and controls are in good condition and all safety devices are labelled and fully operational. |
|  |  | Operator’s manual/instructions supplied by the Manufacture of the plant item is located on the plant. |
|  |  | Hazards Identified with the use of the Plant Hazard Assessment, Danger OHW, Safe working limits on batters, operator safety instructions etc. are displayed clearly in the cabin of the plant for operator reference. |
|  |  | Hazard Controls i.e. Seat belts must be worn and hearing protection must be worn, caution/danger signs (counter weight slewing area, excavators and cranes) etc. are displayed in the cabin or on the plant in a position relevant to the hazard. |
|  |  | Operator cabin/work platform is clean and free of debris, loose tools, equipment, grease, oil etc |
|  |  | Plant Pre Start inspection is complete and a record of the inspection will be provided at commencement on the site. |
|  |  | Reversing camera functional (If fitted) |

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| **Instructions: Verify Box** to be ticked by Owner / Supplier / Operator prior to arrival onsite. **Check Box** to be ticked after visual inspection by the project |
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| **Verify** | **Check** | **Plant Used to Lift Materials and/or equipment (if applicable)** |
|  |  | Backhoes, Excavators, cranes, and loaders used as crane from designed lifting points, the Safe Working Load of the plant item is displayed on the plant as EITHER- A Crane Chart supplied by the manufacture specific to the plant item in the cabin of the plant for operator reference. OR- The Safe Working Load of the equipment on the boom of the loader bucket and of the dipper arm of excavators, a combination of both is required for backhoes. e.g. **SWL 1.2T** |

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| **Verify** | **Check** | **Environmental (Mandatory)** |
|  |  | Clean, free of organic materials (mud, dirt, weeds or seeds) prior to arrival |
|  |  | Engine baffling or noise reduction equipment fitted as per manufacturers specifications |
|  |  | Smoke from internal combustion engines should not be visible for more than ten seconds |

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| **Verify** | **Check** | **Mobile Plant (if applicable)** |
|  |  | Plant is fitted with a Roll Over Protection Structure (R.O.P.S.) and operator restraint. |
|  |  | Plant is fitted with a front horn and reversing/motion alarm. |
|  |  | Plant is fitted with a Rotating or Flashing amber beacon. |
|  |  | Warning devices and other lights (flashing, head, tail, etc) are appropriate for the environment in which plant is being used. (check environment noise criteria particularly if working out of hours) |

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| **Verify** | **Check** | **People Lifting Equipment (if applicable)** |
|  |  | The supplier has provided training for personnel using the platform in the safe use of the equipment. (Scissor Lifts) |
|  |  | Means of rescue and/or retrieval of personnel are established in case of plant failure. |
|  |  | Operator holds appropriate competency certification to operate plant. |
|  |  | Safe Working Load is displayed on work bucket/platform. |
|  |  | Full body harnesses and lanyards are provided for all personnel using the man baskets (excluding Scissor Lifts). |
|  |  | Safety Instruction for the operation of the equipment is clearly displayed in the work bucket/platform |

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| **PLANT OWNER / OCCUPIER** | **PLANT VERIFIER** |
| I certify that the described plant has met the inspection criteria stipulated within this checklist and is being serviced and maintained in accordance with the manufacturer’s specifications | I certify that I have verified that the described plant has met the inspection criteria stipulated within this checklist and is being serviced and maintained in accordance with the manufacturer’s specifications |
| Name: Signature: Date: | Name: Signature: Date: |