





Equipment Inspection Checklist

Project Name:				Project Code:		
Checklist No				Date:		
Make					Model:	
OWN		Hired				Contractor
Equi	pment Name & Number:	CONCRETE MIXER				
Note	e: Please write Yes or No in t	he given box and if so	me comme	nts w	rite in remar	ks column.
SN.	Description			Yes/No	Remarks	
1.	Mixer machine should be physically fit.			#		
2.	Rotating part & IC engine should be covered with fix guard.		with fix	#		
3.	No damage in tire (crack, cuts & air pressure, etc.).		, etc.).	#		
4.	Rotating part of gear should be covered.			#		
5.	Proper handle lock should be available.		#			
6.	Handle should be free from defect.					
7.	Mixer machine should be control the movement.	e with proper handle	e to	#		
8.	Spark arrestor should be operating in flammable a	•	e is			



FIT		PARTIALLY FIT	UNFIT					
Inspe	ected	By Reviewed By	Reviewed By					
Name	e:	Name:						
Signa	iture	with date: Signature with date:						

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