

# Appendix I – Sample Daily Mechanical Lift Inspection Checklist

Complete one form per mechanical lift.

Inspections for the Week of: \_\_\_\_\_

Type of Lift:		Identification/Serial Number:								
Unit/Department Location:									Date and Comments	
Visual Inspection	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.			
Portable Floor Lift Frame	Initials	Initials	Initials	Initials	Initials	Initials	Initials	Initials		
• Wheels (castors) in good working order										
• Wheels (castors) firmly attached to base of lift										
• Brakes operational										
• Nuts and screws secure										
• No cracks or sharp edges on frame										
<b>Slings</b>										
• No frayed edges										
• No holes										
• No ripped, loose stitching										
• Manufacturer's instructions readable										
<b>Ceiling/Wall-mounted Lifts</b>										
• Lift strap (between motor and spreader bar) – no signs of fraying										
• Track – flush against surface (ceiling or wall)										
• Ceiling track end plates/stops secure										
• No signs of loose hardware										
<b>Operational Inspection (test functioning of equipment)</b>										
• All hand controls (up, down, traverse) functional										
• Emergency controls operational										
• Return to charge feature, if available, is the operator activated type and is operational (applies to ceiling lifts only)										
• No unusual noises										
• Floor lift base width adjusts										
• Floor lift boom moves through full range										
• Ceiling/wall lift – no kinks, twists in the line connecting motor to controls										