|  |
| --- |
| SECTION 1 – Equipment Information |
| Employee Name Equipment is Assigned To: |       | Inspection Date: |       |
| Truck (Year/Type): |       | Mileage: |       |
|  |
| SECTION 2 – Inspection Checklist |
| [x]  | Item | [x]  | Item |
| [ ]  | Fire Rakes (5) | [ ]  | Reflector Kit |
| [ ]  | Pulaski (1) | [ ]  | Credit Cards (Voyager & VDOT) |
| [ ]  | Shovel (1) | [ ]  | Tires Properly Inflated |
| [ ]  | Back Pack Tank or Bladder Bag | [ ]  | All Fuel Oil or Mix Containers Properly Labeled |
| [ ]  | Drip Torch with Fuel or Fusees | [ ]  | Boxes Clean |
| [ ]  | Water in Tank (if not below freezing) | [ ]  | Exterior Clean |
| [ ]  | Foam | [ ]  | Interior Clean |
| [ ]  | Chain Saw | [ ]  | Exterior Lights Operational |
| [ ]  | Chain Saw Chaps | [ ]  | Red Light Operational |
| [ ]  | Hand Lantern or Mag Light | [ ]  | Sirens Operational |
| [ ]  | Tow Chain | [ ]  | Winch Operational |
| [ ]  | Jack/Tire Iron | [ ]  | Spare Key in Place (in rear of driver side tool box) |
| [ ]  | Spare Tire | [ ]  | Hose, Suction, 2 ½” x 8’ (2) |
| [ ]  | Hand Tools (minimum- adj. Wrench, screw driver, pliers) | [ ]  | Adapter, Suction, 6” x 2 ½” |
| [ ]  | Fire Extinguisher | [ ]  | Foot Valve/Strainer, 2 ½” |
| [ ]  | Jumper Cables | [ ]  | Hose Shut-off Clamp |
| [ ]  | First Aid Kit | [ ]  | Hydrant Wrench |
| [ ]  | Gazetteer | [ ]  | Valve, 1 ½” Check/Bleeder |
| [ ]  | DOF/Local Directory | [ ]  | Valve, Shut-off, 1” |
| [ ]  | Tee, Inline with Valve, 1 ½” (2) | [ ]  | Valve, Shut-off, 1 ½” |
| [ ]  | Reducer, 1 ½” – 1” (2) | [ ]  | Valve, Gated Wye, 1 ½” (2) |
| [ ]  | Reducer, 1” – ¾” (2) | [ ]  | Valve, Shut-off, ¾” (2) |
| [ ]  | Increaser, ¾” – 1” | [ ]  | Wye, Plain, ¾” (2) |
| [ ]  | Increaser, 1” – 1 ½” | [ ]  | Nozzle, Barrel, 1 ½” (3) |
| [ ]  | Adapter, NH-NPSH, 1 ½” | [ ]  | Nozzle, Barrel, 1” |
| [ ]  | Adapter, NPSH-NH, 1 ½” | [ ]  | Nozzle, Forester, 1” |
| [ ]  | Coupling, Double Fem., 1 ½” | [ ]  | Nozzle, ¾” Garden Hose (2) |
| [ ]  | Coupling, Double Male, 1 ½” | [ ]  | Nozzle, 1 ½” Foam, 60gpm |
| [ ]  | Hose, 1” x 100’ (5) | [ ]  | Nozzle, 1” Foam, 18gpm (2) |
| [ ]  | Hose, 1 ½” x 100’ (5) | [ ]  | Nozzle, ¾” Foam, 8gpm |
| [ ]  | Hose, ¾” x 50’ (5) | [ ]  |       |
| [ ]  | In Case of Accident Information | [ ]  |       |
| [ ]  | Vehicle User Manual | [ ]  |       |
| [ ]  | Vehicle/Equipment Maintenance Record (updated) | [ ]  |       |
|  |
| Organization of Tool and Equipment: | [ ]  Excellent | [ ]  Good | [ ]  Fair | [ ]  Poor |
| Comments: |       |
|  |       |
|  |
| SECTION 3 – Inspected By |
|       |  |  |  |       |
| Inspector Name (Print) |  | Inspector Signature |  | Date |