**Telehandler Familiarisation Handover Checklist**

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| --- | --- | --- | --- |
| **Vehicle Type & Reg. No:** |  | **Site:** |  |
| **Date:** |  | **Operator:** |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Item** | | | | |  | |
| **1** | I confirm I am familiar with all the controls of the above Forklift/Telehandler in accordance with the manufactures instructions including:   * Gear selection * Forward and Reverse selection * Steering Mode selector * Boom Reach – raised, lowered, out and in * Carriage Tilt * Stabiliser legs * Chassis Levelling Operation   **When completed, the form to be kept with the machines documents!** | | | | | □  □  □  □  □  □  □  □ | |
| **2** | I am aware of the Safe Working Load/Ratings and they are compatible with the intended use. | | | | | □ | |
| **3** | I understand and have completed the Daily check sheet for today’s operation and will complete this check sheet daily before starting operations | | | | | □ | |
| **4** | I have located the following documentation and equipment: | | | | |  | |
|  | 1. Manufactures operating manual & Load charts | | | | | □ | |
|  | 1. Operators Record and Inspections book including Thorough Examination Certificates | | | | | □ | |
|  | 1. Fire Extinguisher | | | | | □ | |
|  | 1. Grease Gun, Compressor and Tyre Pressure Gauge | | | | | □ | |
|  | 1. First Aid Kit | | | | | □ | |
|  | 1. Air Horn (fire Alarm) | | | | | □ | |
|  | 1. Tip Skip extension/operating handle | | | | | □ | |
| **Comments** | | | | | **Actions Taken** | | |
|  | | | | |  | | |
| **Operators Name:** | |  | **Site Managers Name** |  | **Actions agreed** | |  |
| **Signature:**  **Date:** | |  | **Signature:**  **Date:** |  | **Signature:**  **Date:** | |  |