SOLANO'S INC. ![Do it Best]

Electric Ride-On Forklift - Operator Evaluation Form

Operator name		Start time
Store number 1 _____ 2 _____ 3 _____ 4 _____		Stop time
Lift Type Fossil _____ Elect __X___		Date

Pre-Shift Inspection	**Value**	**1st Miss**	**2nd Miss**	**Remarks**
Leaks under truck	2			
Tire condition	1			
Forks, pins	2			
Hoses, chains	2			
Seat belt	2			
Capacity plate	2			
Park brake	2			
Deadman brake	2			
Steering	2			
Lift, tilt, reach controls	2			
Lights, horn	2			
Bat chrg level,cable,conector	2			

Driving Without Load				
Release brake	2			
Smooth starts, stops, turns	2			
Proper turn, rear end swing	2			
Forks at safe height/angle	2			
Reach retracted	2			

Loading/Unloading				
Truck square to load	2			
Minimal inching	2			
Enter with forks level, height	2			
Forks fully into load	2			
Tilt back after picking up load	2			
Tilt frwd only to deposit load	2			
Proper load position on rack	2			
Bumps against rack	2			
Pulls out of load correctly	2			
Proper use of reach mechanism	2			

Driving with load	Value	1st Miss	2nd Miss	Remarks
Smooth starts, stops, turns	2			
Proper turn, rear end swing	2			
Correct fork tilt	2			
Obstruct view, drives in reverse	2			
Travels with load at proper height	2			

General Safety

	Value	1st Miss	2nd Miss	Remarks
Excessive speed	2			
Wears seat belt	2			
Looks behind before backing	3			
Aware of overhead clearances	2			
Proper horn use	3			
Slows for intersections	2			
Proper ramp operation	2			
Proper trailer procedures	4			
Yields to Pedestrians	2			
Keeps body within running lines	2			

Parking

	Value	1st Miss	2nd Miss	Remarks
In safe area	2			
Forks lowered	2			
Brake on	2			
Controls neutral	2			
Engine off	2			
Charger connected to battery	2			
Score	100			

Additional Comments

Operator Signiture _____

Evaluator Signiture _____