

महागणपती

MAHAGANPATI ASSOCIATE

Gat No. 887, Khedkar Vasti, Ranjangaon Ganapati, Shirur, Pune 412209

Mob: 9800526639/9850990739, Email: mahaganpatiang@gmail.com

GSTIN No.: 27LCWPK4064P1ZD State 27- Maharashtra

Date: / /

Declaration

- 1) Are the tools and equipment used in good working condition? : Yes, all tools are working in good condition.
- 2) Do the tools and equipment comply with standards such as ISI Mark / Energy Efficient 5 star rating guidelines? Yes, All tools and equipment's are with standards such as ISI Mark / Energy Efficient 5 star rating guidelines
- 3) Is the holding handle of equipment in good condition? Yes, holding handle of equipment is in good condition
- 4) Are all plants and equipment compliant with the safety requirements? (including not damaged cables, no loose connections, equipped with 3 pin top). Yes, all plants and equipment compliant with the safety requirements.
- 5) Do contract employees have correct licenses / certificates to operate the plants and equipment? There are no contract employees

For Mahaganpati Associate

Pawan Deshmukh

Pawan Deshmukh

Production Manager

Date: 05/03/2023



EQUIPMENT DAILY CHECKLIST AND SAFETY INSPECTION FORM

NOTE: This form is not to be used for inspections of mobile/overhead cranes, powered industrial trucks, or aerial lifts. For inspections of such equipment, use FBP-OS-PRO-00025-F05 (for mobile/overhead cranes), FBP-OS-PRO-00057-F01 (for powered industrial trucks), or FBP-WM-PRO-00061-F07 (for aerial lifts)

Section 1

Location / Project: Furnace _____

Contractor: FBP or _____

Contact Name: KANIF KOLHE _____

Contact Phone: _____

Section 2 – Check Type of Equipment Inspecting

<input checked="" type="checkbox"/> Cutting Machine	<input checked="" type="checkbox"/> Pug Machine	<input checked="" type="checkbox"/> Loader	<input checked="" type="checkbox"/> Leth	Manufacturer	MAHAGANPATI ASSOCAITE
<input checked="" type="checkbox"/> Machine	<input checked="" type="checkbox"/> Milling Machine	<input checked="" type="checkbox"/> Welding Machine	<input checked="" type="checkbox"/> Dozer	Model Number	9860526639
<input checked="" type="checkbox"/> Tractor	<input checked="" type="checkbox"/> Roll-off Truck	<input type="checkbox"/> Other (specify) _____		Serial Number	

- Place a check (✓) mark in the box to indicate inspection is complete and is satisfactory.
- Mark "P" in box where Problem is found and make further comments on next page, if necessary.
- Report all items in need of repair to the Supervisor at the time of inspection.
- Mark N/A for items which do not apply.

Section 3 – Mark as Directed Above

Inspection Item / Day of Week →	April	May	June	July	AUG			
Worker Badge Number	✓							
Worker Initials	✓							
Date	✓							
Hour Meter Reading	✓							
Structural Damage – none apparent	✓							
Tires / Tracks – condition acceptable	✓							
Load Chart – available/readable	✓							
Glass / Mirrors – clean/clear; unobstructed	✓							
Electrical Connections (generators)	✓							
Hydraulic Hoses – good condition/no leaks	✓							
Check Valves - functional	✓							
Lubrication – adequate amount	✓							
Fluid Levels – adequate amounts/no leaks	✓							
Engine Oil - level/appearance good	✓							
Cooling Water – adequate amount/no leaks	✓							
Operating Manual - available	✓							
Fire Extinguisher – present, charged, dated	✓							
Seat Belts – functional/latch properly	✓							
Operating Controls - functional	✓							
Horn / Gauges - functional	✓							
Lights and Reflectors – clean/functional	✓							
Windshield Wipers - functional	✓							
Air Systems - functional	✓							
Steering Mechanism - functional	✓							
Brakes - functional	✓							
Backup Alarm - functional	✓							
Kill Switch (if available) - functional	✓							
Roll-off Truck Cable – no single strand broken; no kinks; no stretching; clamps tight	✓							

Checked By
 Pawan Deshmukh
 Production manager
 Date: 02/05/2023

