

Customer Onr Const Customer PO # _____

Contract # C118001470

Salesman Bailey Denny With a Trailer Y/N _____

Unit # DL 200 #0055

On Rent 10-4-2024 Hours Out _____ Delivery Date _____

Transporter CPU

Off Rent _____ Hours In _____ Pickup Date _____

Transporter _____

LAST SERVICE HOURS: 593

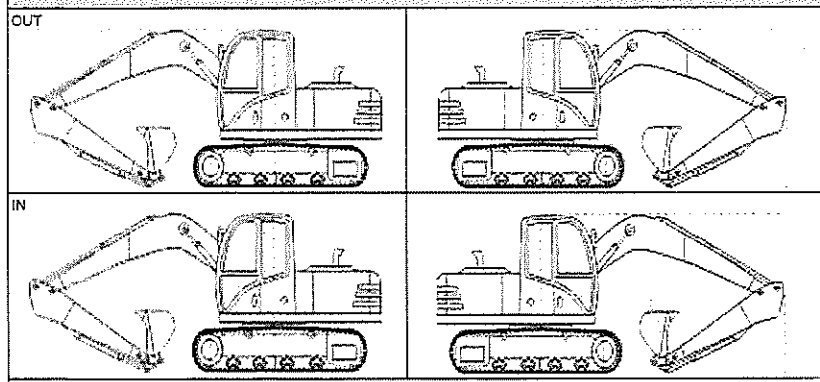
NEXT SERVICE HOURS: 1000

ENGINE INSPECTION		EXTERIOR INSPECTION	
Mark Key: : Good / Pass, : X : Needs Attention, O : Not Applicable (Please explain 'X' marks below)		Mark Key: : Good / Pass, : X : Needs Attention, O : Not Applicable (Please explain 'X' marks below)	
	OUT	IN	OUT
Engine Operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Belt & Fan	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Radiator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Air Induction System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fuel Lines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Exhaust System	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Battery Terminals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Battery Disconnect Switch	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Gauges and Switches	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hydraulic Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hydraulic Lines	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Remarks:			
			Cab Frame
			Lights
			Mirrors & Mounts
			Windows
			Doors
			Joints & Bushings
			Pins
			Boom
			Stick
			Hydraulic Lines
			Lift Cylinders
			L Track Wear
			R Track Wear
			Track Tension
			Drive Gears
			Track Rollers
			Swing Motor
			Remarks:

FLUIDS INSPECTION	
Mark Quantity in Fraction, F: Full, E: Empty/Note Any Additions	
	OUT
Fuel	<input checked="" type="checkbox"/>
Oil	<input checked="" type="checkbox"/>
Coolant	<input checked="" type="checkbox"/>
Hydraulic Fluid	<input checked="" type="checkbox"/>
Swing Motor Oil	<input checked="" type="checkbox"/>
Final Drive Fluid	<input checked="" type="checkbox"/>
DEF	<input checked="" type="checkbox"/>
Remarks:	

INTERIOR CONDITION	
Mark Key: : Good / Pass, : X : Needs Attention, O : Not Applicable (Please explain 'X' marks below)	
	OUT
Seat	<input checked="" type="checkbox"/>
Control Sticks	<input checked="" type="checkbox"/>
Safety Lever	<input checked="" type="checkbox"/>
A/C & Radio	<input checked="" type="checkbox"/>
Controller Screen	<input checked="" type="checkbox"/>
Remarks:	

GENERAL PHYSICAL CONDITION
Mark Key: X : Missing, O : Needs Attention (Please explain marks below)



Remarks: _____

BUCKETS & ACCESSORIES
Mark Quantities and Condition (including ones already on machine)

	OUT	IN	Serial Number
Bucket	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>47302-91-1</u>
Quick Coupler	<input type="checkbox"/>	<input type="checkbox"/>	
Extra Buckets or Attachments	<input type="checkbox"/>	<input type="checkbox"/>	<u>0166</u>

Remarks: _____

Notes: _____

OUTGOING CHECKED BY: Kolt L DATE: 10/4/24

RECEIVED BY: _____ DATE: _____

INCOMING CHECKED BY: _____ DATE: _____

RETURNED BY: _____ DATE: _____