

Farm Hazard Inspection Checklist

HARVESTING EQUIPMENT

Completed By: _____ Date: _____

Equipment Identification (Make/Model): _____

Items	Hazards		Action		Notes
	Yes	No	Target Date	Corrected	
Is the operator's manual available for operator or anyone servicing the equipment?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are lockout procedures available?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are all belts and chains properly adjusted and shielded?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Is the safety latch, jack stand, and/or other safety locks in working order to prevent equipment from dropping?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are ladders and steps in good repair and kept free of mud and grease?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Does self-propelled equipment have 10-pound (minimum) ABC type fire extinguisher? (Combines should have a minimum of 1 extinguisher at ground level and 1 at operator's platform.)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Is each self-propelled or towed machine equipped with an unfaded SMV emblem?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Do all flashers and lights work? Are lights and reflectors clean?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are controls clearly marked? Do gauges work properly?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are warning decals cleaned and undamaged?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are moving parts free of accumulations of crop materials?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are tires properly inflated and in good condition?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are cab windows and mirrors clean to maintain good visibility?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are safety hitch pins available and used?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Is operator's seat seatbelts in good repair and use required?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Are extra riders restricted from being in the operator's cab? (If an additional seat is available, seat belt must be provided and used by the rider.)	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Have employees been provided operator instructions in accordance with OSHA 1928.57 (a)(6) within the past year?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Have employees been trained on proper use of a fire extinguisher?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Is there a first-aid kit available?	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	

Is there an Emergency Action Plan for locations where this equipment will be operated?

