

San Juan County Fire Department

Apparatus Checklist

Date:

Apparatus Number:

Inspected by:

Odometer Reading

Engine Hours

X	OK
O	Out of Service
NA	Not Applicable

Report Any Major Defects to the Chief of the District and document in ERS

<input type="checkbox"/>	Fuel Level (Please specify Fuel Level)	<input type="checkbox"/>	Check Pump Gauges
<input type="checkbox"/>	Coolant Level	<input type="checkbox"/>	Operate Relief Valve
<input type="checkbox"/>	Hoses and Connections	<input type="checkbox"/>	Operate Transfer Valve -- Weekly
<input type="checkbox"/>	Fan and Alternator Belts	<input type="checkbox"/>	Operate all Pump Valves -- Weekly
<input type="checkbox"/>	Battery Water Level	<input type="checkbox"/>	Check for Water Leaks
<input type="checkbox"/>	Battery Connections	<input type="checkbox"/>	Operate Booster Reel or Discharge Water
<input type="checkbox"/>	Lights, Sirens, Horn	<input type="checkbox"/>	Clean Apparatus Body
<input type="checkbox"/>	Windshield Wipers and Fluids	<input type="checkbox"/>	Check all Tools and Compartments
<input type="checkbox"/>	Radio Check	<input type="checkbox"/>	Check SCBA and Airpacks
<input type="checkbox"/>	Oil Level	<input type="checkbox"/>	Operate all Nozzles
<input type="checkbox"/>	Oil Leaks	<input type="checkbox"/>	Operate all Drains -- Weekly
<input type="checkbox"/>	Transmission Fluid Level - Warm Running in Neutral	<input type="checkbox"/>	Check Fuel in Generators and Fans
<input type="checkbox"/>	Power Steering Fluid Level	<input type="checkbox"/>	Operate all Power Tools - Shut off when done
<input type="checkbox"/>	Brake Fluid Level or Air Pressure Level	<input type="checkbox"/>	Auto-eject functioning
<input type="checkbox"/>	Tire Pressure		
<input type="checkbox"/>	Flashlights		
<input type="checkbox"/>	Extinguishers		
<input type="checkbox"/>	Emergency Brake		
<input type="checkbox"/>	Prime the Pump -- Weekly		
<input type="checkbox"/>	Run Pump at 150 psi for 3 minutes		

Comments:

Completed by: _____