CITY OF WHITE PLAINS
DEPARTMENT OF BUILDINGS
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AUTO/MISC. LIFT INSPECTION CHECK LIST

INSTRUCTIONS:

1. Mark (x) the appropriate box as each item is completed. If there are multiple inspectors, each inspector shall initial the items they inspected.
2. Record comments, observations and the date items were repaired or replaced.
3. Items not inspected, write(NI) in the comments box. If any items in not applicable to this auto lift, write (NA).
4. Sign and date at the bottom when all items are completed.

Business Name: **Equipment Address:**

INSPECTION/SERVICE ITEM	OK	NEEDS REPAIR	COMMENTS/DATE REPAIRED OR REPLACED
15 Minute leak test(vehicle elevated			
Hydraulic System Capacity_____lbs			
Test Function:			
Oil Level & Inspect for Leaks:			
Valves:			
Hoses:			
Cables, Chains, V-Belt, Spindles			
Check for Excess Play:			
Amount of Wear:			
Cables Lubricated:			
Pullets Greased:			
Pulleys, Pins & Sprockets Condition:			
Columns, Posts Rust/Damage/Wear:			
Alignment:			
Rubbing Blocks or Guide Rollers:			
Rolling Bridge, Wheel Free Capacity_____lbs			
Leak Test:			
Locks:			
Rollers or Slides:			
General Decking and Covers Secured:			
Anchor Bolts & Other Fasteners:			
Swing Arm Restraints, Telescoping Stops:			
Wheel Chocks:			
Runway Stops:			
Drive-up Ramps:			
Test Lift Locks:			
Inspect/Test Other Safety Features:			
Electrical Function of Switches:			
Limit Switch:			
Condition of Terminals:			

Inspected by: **Date:**