

MOBILE CRANE INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Cab & Controls

Yes No — Controls are labeled and function smoothly

Yes No — Load charts are visible and legible

Yes No — Fire extinguisher is present and charged

Yes No — Warning lights and horns are operational

Hydraulic System

Yes No — Hoses and fittings are free of leaks

Yes No — Fluid levels are within operating range

Yes No — Cylinders show no signs of pitting or damage

Yes No — Pumps and motors operate without unusual noise

Boom & Rigging

Yes No — Boom sections extend and retract smoothly

Yes No — No structural cracks or deformation visible

Yes No — Sheaves turn freely without excessive wear

Yes No — Wire rope is free of kinks or broken wires

Outriggers & Chassis

Yes No — Outriggers extend fully and lock securely

Yes No — Pads are stable and free of cracks

Yes No — Tires are properly inflated and undamaged

Yes No — Chassis frame is free of rust or bends

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately