

# EASTERN MICHIGAN UNIVERSITY

## Quarterly Aerial Lift Inspection Checklist

All checks must be completed before operation of the aerial lift. This checklist must be used at quarterly intervals or every 300 hours, whichever occurs first.

MANUALLY PROPELLED LIFT \_\_\_\_\_ SELF PROPELLED LIFT \_\_\_\_\_  
LIFT MODEL NUMBER \_\_\_\_\_ SERIAL NUMBER \_\_\_\_\_

INITIAL	DESCRIPTION
_____	Perform all checks listed on Daily and Weekly and Monthly Inspection Checklists.

### Additional Maintenance Requirements For Severe Usage Applications.

INITIAL	DESCRIPTION
_____	Change hydraulic filter element.

DATE \_\_\_\_\_ INSPECTED BY \_\_\_\_\_