



TROLLEY INSPECTION REPORT

400 North Pearl St.
Albany, NY 12207
(800) 342-4188

WWW.ALL-LIFTS.COM

DATE: _____

REPORT #: _____

EQUIPMENT ID: _____

CUSTOMER: _____
MANUFACTURER: _____
MODEL NUMBER: _____
SERIAL NUMBER: _____

CAPACITY: _____ TONS

LOCATION: _____

	OK	REPAIR	REPLACE	UNUSABLE	REMARKS
TROLLEY					COMMENTS
CAPACITY MARKINGS					
HARDWARE					
LOAD BAR ASSEMBLY					
STEEL FRAME CONDITION					
WHEEL BEARINGS					
WHEELS					

ADDITIONAL COMMENTS: _____

Note: This inspection report shall not be construed as any warranty or guarantee of the equipment inspected, or as to the equipments' future operating capabilities. This report serves only as a summary of the visual inspection performed on the above date.

INSPECTOR:

Signature of Inspector