



An Oshkosh Corporation Company

JLG Industries, Inc. (Australia)
11 Bolwarra Road
Port Macquarie, NSW 2444
Australia

SCISSOR LIFT
Annual Machine Inspection Report

JLG Account Holder Name & Address

Customer No. :

Product Owner/User Name & Address

Owner User

Serial Number:
Machine Model:
Hourmeter Reading:
Previous Inspection Date

Customer No. :
[Blank lines for address and customer number]

Product Owner/User Name & Address
[Blank lines for name and address]

ANNUAL MACHINE . . . . . The Owner must perform an Annual Machine Inspection of this machine no later than 13 months from the date of the prior Annual Machine Inspection. This Annual Machine Inspection is to be performed by a mechanic qualified on the specific make and model of aerial work platform.

Check each item below. (Refer to Operators & Safety, Service & Maintenance Manuals for specific information regarding inspection procedures and criteria.) Indicate in the appropriate space as each item has been performed. If the item is found to be not acceptable, describe each discrepancy in the comments space at the bottom of the form. Use additional paper if necessary. Immediate action must be taken to correct all discrepancies. The Owner shall not place the machine in service until all discrepancies have been corrected.

Table with 7 columns: Y=Yes (Passed), N=No (Failed), C=Corrected, NA=Not Applicable, Y, N, C, NA. Rows include: FUNCTIONS & CONTROLS, PLATFORM ASSEMBLY, SCISSOR ARMS.

Table with 7 columns: Y=Yes (Passed), N=No (Failed), C=Corrected, NA=Not Applicable, Y, N, C, NA. Rows include: CHASSIS, POWER SYSTEM, HYDRAULIC/ELECTRICAL SYSTEM.

Table with 7 columns: Y=Yes (Passed), N=No (Failed), C=Corrected, NA=Not Applicable, Y, N, C, NA. Rows include: HYDRAULIC/ELECTRICAL SYSTEM (continued), MANUALS & DECALS, GENERAL, COMMENTS.

The undersigned certifies that this machine has been inspected, per each area of inspection, and any and all discrepancies have been brought to the attention of the Owner/User, and that all discrepancies have been corrected prior to any further use of this machine.

Inspector: [Signature] / [Printed Signature] / [Date] Owner/User: [Signature] / [Printed Signature] / [Date]

Inspector's Employer: [Blank line]