

DAILY VEHICLE CHECKLIST TOOLBOX TALK



SUBJECT	WHY SHOULD YOU COMPLETE A DAILY VEHICLE CHECKLIST

DAILY VEHICLE CHECKLIST

Facilitator:

This toolbox talk will cover the reason a driver should complete a daily vehicle checklist. The main reason is for your safety as the driver of the vehicle plus the safety of the public, whether on a driver on the road or a pedestrian.

Ask participants: General questions to help understand what they know and why they have to do daily vehicle checks.

Why is completing a daily vehicle checklist important?

Some responses:

- to make sure that your vehicle/s are fully roadworthy and ready for the trip ahead.
- identify defects - preventive maintenance.
- it can save lives.
- helps improve vehicle performance.
- it is legally required.

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As a driver you should be able to identify vehicle defects and use the Daily Vehicle Checklist as a guide and to flag potential or problems for maintenance or fix anything prior to leaving the depot.

A daily walkaround only takes 5 minutes and can make a difference in respect to breakdowns, delays and safety. Not undertaking a proper check can often lead to major repair and maintenance costs and the vehicle off the road for a longer period.

Check process!

- 1) Undertake the vehicle inspection.
- 2) Submit the results of the inspection.
 - No issue – hand checklist to supervisor.
 - Major Issue – report it immediately to arrange proper repairs.
 - Confirm repairs have been completed.

Things that should be checked on your truck are:

- Lights – check internal (eg: dashboard) and external lights (eg: headlights, blinkers, indicators, brake lights and warning lights are working).
- Horn and steering movement.
- Hand and foot brakes are working properly.
- Window wipers are working, blades are not worn and the washer fluid is topped up.

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- Mirrors are properly aligned and not damaged.
- Mirrors and windows are clean.
- Seats are secure and seatbelts are not damaged and are operational.
- Check truck battery – look for leaks and they are connected correctly and there are no loose fittings.
- Tyres and wheels have the legal minimum tread 1.6mm depth and are safe, especially to handle wet weather and safe braking. Tyres has the correct pressure and wheel nuts are secure plus have no tears, cuts or damage. Spare tyre is in good condition.
- Fluids, fuel and oil are all checked and there are no leaks under the vehicle. Leaks can also be tested if you run the engine. Make sure you have a full tank of fuel to complete the trip, and fuel cap is securely fitted.
- Check bodywork and doors, making sur there are not damage, doors and body panels are secure.
- Truck fitted with tail lift are working properly and there is no damage.
- Trucks with doors, eg: Pantech, must sure the doors open and close properly and door locks work effectively.
- Exhaust has no visible signs of blockages and does not emit excessive amounts of smoke.
- Emergency equipment, first aid kit, safety sign/triangle and emergency contact numbers list are kept in the vehicle in the event of a breakdown.
- All the equipment required for the removals are loaded in the truck, eg: pads, straps, trolleys, tools etc.

Personal assessment check

Before you leave the depot, ask yourself:

- Am I alert and in good health.
- I am not under the influence of alcohol.
- I am not under the influence of illegal drugs.
- I am not affected by prescription medications.
- I do not have a backlog of sleep deprivation.
- Trip has been discussed with a supervisor.
- National Work Diary (if applicable) is up to date and accurate.
- I have not had any traffic infringements since my last report.

Finally, the driver and supervisor must sign and date the Daily Vehicle Checklist form.

REFERENCE:

AFRA Daily Vehicle Checklist Form



Daily-Vehicle-Check.
pdf

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Items Raised/Corrective Action	Action By	Action completed	
		Sign off	Date

DATE:.....

FACILITATOR SIGNATURE.....

Daily Vehicle Check

Damage check – Driver: _____

Date: _____

Time: _____ am/pm

State: _____

Truck size: _____

Start Odometer: _____ KM Registration: _____

Do you have a current licence to drive this vehicle: Yes No

Note: Drivers Responsibilities

1. To fully complete this form and return it to the office prior to departure.
2. To operate this vehicle in a legal, safe and courteous manner.
3. To ensure that the vehicle is left clean and tidy.

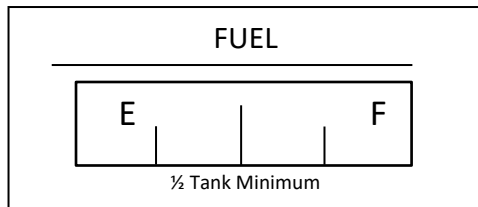
We urge you to check this form thoroughly before departing to ensure that all damage is indicated as you may be held liable for any damage not indicated.



EQUIPMENT	
Gate Key:	Yes/No
Fuel Card:	Yes/No
Tail Lift Key:	Yes/No
First Aid Kit:	Yes/No
Truck Folder:	Yes/No
Safety Vest(s):	Yes/No
Caution Sign(s):	Yes/No
Safety Triangle:	Yes/No
Spill Kit:	Yes/No

Mark the Vehicle appropriately:

- X – Dent
- O - Scratch



	OK	FAULTY	NA
Tyres/Wheels, including spare tyre/s			
Check tyre pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check tread depth – minimum 1.5mm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wheel nuts secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jack and wheel brace – present and in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lights and Reflectors			
Check lights – head lights, indicators, reversing lights, hazard lights	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Check reflectors and lenses are in place and not damaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows, Mirrors and Wipers			
Visibility - clean windscreen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wipers and windscreen washers operating correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	OK	FAULTY	NA
Check all windows and mirrors clean, adjusted and in a good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle Structure and Bodywork			
Panels and structural elements – secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turntable – greased, no obvious faults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No leaks of any fluids (oil, fuel, air, water, refrigerant coolant, hydraulic fluid, brake fluid etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engine			
Check oil levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check water/coolant level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check drive belts – alternator, air con, water pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check batteries and terminals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brakes			
Check brake failure indicators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Check pressure and vacuum gauges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Draining air tanks (full air and air-over-hydraulic systems only on rigid and articulated combinations – except Buses and Coaches.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ancillary Equipment			
Tools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manual handling equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Straps, ropes, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DGS signs, if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No
I am alert and in good health	<input type="checkbox"/>	<input type="checkbox"/>
I am not under the influence of alcohol	<input type="checkbox"/>	<input type="checkbox"/>
I am not under the influence of illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>
I am not affected by prescription medications	<input type="checkbox"/>	<input type="checkbox"/>
I do not have a backlog of sleep deprivation	<input type="checkbox"/>	<input type="checkbox"/>
Trip has been discussed with a supervisor	<input type="checkbox"/>	<input type="checkbox"/>
National Work Diary is up to date and accurate	<input type="checkbox"/>	<input type="checkbox"/>
I have not had any traffic infringements since my last report	<input type="checkbox"/>	<input type="checkbox"/>
Are you under any form of self-isolation as the result of an order of any government authority or as the result of a recommendation of a health professional?	<input type="checkbox"/>	<input type="checkbox"/>
Are you waiting for the results of a COVID-19 test?	<input type="checkbox"/>	<input type="checkbox"/>
Are you suffering from any flu-like symptoms (including a sore throat, fever, tiredness or cough)?	<input type="checkbox"/>	<input type="checkbox"/>

Operations Notified: Yes No

Operational staff notified (name): _____

Drivers Signature: _____