

Coates Inspection Checklist		Photos																																																								
Tools & Equipment (Electric, Pneumatic, Hydraulic or Internal Combustion)																																																										
Asset # <u>1165895</u>																																																										
General Information: *** Copy Data Plate information in this section *** Type of Tool: <u>Trailer EX</u> Make/ Model: <u>Auswide</u> Engine / Motor - Make / Model: <u>///</u> Year: <u>2016</u> Engine Serial Number: <u>///</u> Serial Number: <u>6T9T26V86F04BZ</u> Meter Reading: <u>333</u>		<input type="checkbox"/> Data Plate																																																								
Comments: 																																																										
Features: List features or options for the machine: Machine Type: Frame Mount <input type="checkbox"/> Trailer Mount <input type="checkbox"/> AC / DC Range _____ Leads <input type="checkbox"/> Yes <input type="checkbox"/> No Engine Horsepower _____ Leads Length _____ Auxiliary Power _____		4-Corner Photos <input type="checkbox"/> Left-Front Corner <input type="checkbox"/> Left-Rear Corner <input type="checkbox"/> Right-Front Corner <input type="checkbox"/> Right-Rear Corner <input type="checkbox"/> Damage <input type="checkbox"/> Damage <input type="checkbox"/> Damage																																																								
Overall Appearance: <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Good</th> <th style="text-align: center;">Fair</th> <th style="text-align: center;">Poor</th> <th></th> </tr> </thead> <tbody> <tr> <td>Switches/Cords</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>_____</td> </tr> <tr> <td>Sheet metal/Fiberglass Condition</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>_____</td> </tr> <tr> <td>Paint</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>_____</td> </tr> <tr> <td>Fit for Designed Purpose</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>_____</td> </tr> </tbody> </table>			Good	Fair	Poor		Switches/Cords	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	Sheet metal/Fiberglass Condition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	Paint	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____	Fit for Designed Purpose	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____																																
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Engine or Electric Motor: Power: Diesel <input type="checkbox"/> Petrol <input type="checkbox"/> Hydraulic <input type="checkbox"/> Electric <input type="checkbox"/> Air <input type="checkbox"/> Does it start? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Did it need to be jumped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Acceptable Power <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Unusual Noises <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Comments: _____		<input type="checkbox"/> Right Side <input type="checkbox"/> Left Side																																																								
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