

Date: _____	Cart#: _____	Work Order# _____
Site: _____		

This form shall be completed and maintained by the Security and Custodial Lead staff at each site. Section VI of the Utility Cart Safety Guidelines outlines the following process:

- If deficiencies are identified where items are marked Unsatisfactory on the checklist:
 - a. A work order shall be created, and the cart is taken out of service.
 - b. The findings will be reported to a supervisor.
 - c. An electronic copy of the checklist will be forwarded to the Coordinator of Student Services.
 - d. The original copy of the checklist will be kept at the site.

	S	U	N/A
S - Satisfactory			
U - Unsatisfactory			
N/A - Not Applicable			
Inspection Items	S	U	N/A
Lights: <ul style="list-style-type: none"> ● Headlights fully operational (both left and right) ● Headlights and tail lights free of cracks or missing lenses ● Brake lights fully operational 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Tires: <ul style="list-style-type: none"> ● Inflated properly (not flat or low) ● No visible cracks or uneven wear ● Free of foreign objects (nails, screws, etc.) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Battery: (Use appropriate Personal Protective Equipment) <ul style="list-style-type: none"> ● Battery tops free of corrosion (Rinse with plain water, if needed) ● Water levels are full ● Cables free of corrosion and cracks 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Gas Carts: (Use appropriate Personal Protective Equipment) <ul style="list-style-type: none"> ● Gauges reflect adequate fuel level ● Gauges reflect adequate oil level 	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Brakes: <ul style="list-style-type: none"> ● Back up/reverse alarm working ● Parking brake engages ● No squeaking, squealing or grinding sounds 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Windshield/ Mirrors (if equipped): <ul style="list-style-type: none"> ● Clear of cracks and scratches 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horn (if equipped): <ul style="list-style-type: none"> ● Operable and adequately audible/loud 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security Keypad System: <ul style="list-style-type: none"> ● Intact and no signs of defacement or vandalism 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTES: _____

Lead Staff/ Inspector) Name _____ Signature _____