

BRUSH 24 EQUIPMENT / MAINTENANCE CHECKLIST

MILEAGE: _____

DATE: _____

<p><u>Cab Interior</u> ↓</p> <ul style="list-style-type: none"> <input type="checkbox"/> Mobile Radio (on Channel 1) <input type="checkbox"/> 2-Traffic vests <input type="checkbox"/> Accountability Board <input type="checkbox"/> Haz-Mat DOT Guidebook <input type="checkbox"/> PrePlan Book <p><u>Emergency Lights/Siren</u> ↓</p> <ul style="list-style-type: none"> <input type="checkbox"/> Bar Light <input type="checkbox"/> LED Lights <input type="checkbox"/> Radio on Ch.1 <input type="checkbox"/> Siren 	<p><u>Driver Side Cabinet #1</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> K-12 Rescue Saw <input type="checkbox"/> Chain Saw <input type="checkbox"/> Chain Saw Chaps <input type="checkbox"/> Gas Can (Mixed 50:1) <input type="checkbox"/> Bar oil <input type="checkbox"/> Sawz-All <input type="checkbox"/> Spare circular blades 	<p><u>Officer Side Cabinet #7</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Foam Pro-Pak <input type="checkbox"/> Box of trash Bags <input type="checkbox"/> Bag of FiberPerl <input type="checkbox"/> Haz-Mat Tape <input type="checkbox"/> Oil Dry <input type="checkbox"/> 3-Gallons CLASS A foam 																																																						
<p><u>Preventive Maintenance</u></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;"><u>ok</u></th> <th style="width: 10%; text-align: center;"><u>needs repair</u></th> </tr> </thead> <tbody> <tr><td>Engine Oil</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Coolant level</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Brake fluid</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Transmission fluid</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Belt tension</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Battery connections</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Power steering fluid</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Air filter</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Tire pressure</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Headlights</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Brake lights</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Turn signals</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Horn</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Buck-up alarm</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Fuel level >3/4</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Starter</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Road test >5 miles</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table>		<u>ok</u>	<u>needs repair</u>	Engine Oil	<input type="checkbox"/>	<input type="checkbox"/>	Coolant level	<input type="checkbox"/>	<input type="checkbox"/>	Brake fluid	<input type="checkbox"/>	<input type="checkbox"/>	Transmission fluid	<input type="checkbox"/>	<input type="checkbox"/>	Belt tension	<input type="checkbox"/>	<input type="checkbox"/>	Battery connections	<input type="checkbox"/>	<input type="checkbox"/>	Power steering fluid	<input type="checkbox"/>	<input type="checkbox"/>	Air filter	<input type="checkbox"/>	<input type="checkbox"/>	Tire pressure	<input type="checkbox"/>	<input type="checkbox"/>	Headlights	<input type="checkbox"/>	<input type="checkbox"/>	Brake lights	<input type="checkbox"/>	<input type="checkbox"/>	Turn signals	<input type="checkbox"/>	<input type="checkbox"/>	Horn	<input type="checkbox"/>	<input type="checkbox"/>	Buck-up alarm	<input type="checkbox"/>	<input type="checkbox"/>	Fuel level >3/4	<input type="checkbox"/>	<input type="checkbox"/>	Starter	<input type="checkbox"/>	<input type="checkbox"/>	Road test >5 miles	<input type="checkbox"/>	<input type="checkbox"/>	<p><u>Driver Side Cabinet #2</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Dry Chemical <input type="checkbox"/> CO2 Extinguisher <input type="checkbox"/> Bug Spray <input type="checkbox"/> Generator Cord <input type="checkbox"/> Wasp Spray <input type="checkbox"/> Traffic Paint 	<p><u>Truck Bed</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water Extinguisher <input type="checkbox"/> 100ft 1 1/2" Hose <input type="checkbox"/> 50ft 2 1/2" Fill Hose <input type="checkbox"/> Attic Ladder <input type="checkbox"/> 8ft Pike Pole <input type="checkbox"/> 6ft NY Hook <input type="checkbox"/> 10ft NY Hook <input type="checkbox"/> 100ft Booster Reel <input type="checkbox"/> 200ft Cord Reel <input type="checkbox"/> Generator <input type="checkbox"/> Hose Washer <input type="checkbox"/> 5-Traffic Cones
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	<p><u>Driver Side Cabinet #3</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> EMS Bag <input type="checkbox"/> Spare O2 Tank <input type="checkbox"/> Traffic Sign <input type="checkbox"/> BioHazard Tape <input type="checkbox"/> Fire tape <input type="checkbox"/> Clorox Wipes <input type="checkbox"/> EMS Gloves 	<p><u>Officer Side Cabinet #6</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Flotation Vest <input type="checkbox"/> 2-Backback Sprayers <input type="checkbox"/> A/C Hot Stick <input type="checkbox"/> Road Flares <input type="checkbox"/> Bolt Cutters <input type="checkbox"/> Flat Head Axe <input type="checkbox"/> Pick Head Axe <input type="checkbox"/> DENVER tool <input type="checkbox"/> Halligan Bar <input type="checkbox"/> Dead blow hammer <input type="checkbox"/> Piercing Nozzle <input type="checkbox"/> Battery Cable Cutters 																																																						
	<p><u>Driver Side Cabinet #4</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> 2-Air Packs w/masks <input type="checkbox"/> Spare SCBA Cylinder <input type="checkbox"/> Flashlight 	<p><u>Officer Side Cabinet #5</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> 2-Air Packs w/ masks <input type="checkbox"/> Spare SCBA Cylinder <input type="checkbox"/> Flashlight 																																																						

Repairs Performed

1. _____

By: _____ DATE: _____

2. _____

By: _____ DATE: _____

3. _____

By: _____ DATE: _____

Notes:

Operator: _____

Officer: _____