

Station Apparatus Check

Unit#		Month: _____ Year: _____
Daily Items	Weekly Items (Daily +)	Monthly Items (Weekly +)
<ul style="list-style-type: none"> Safety Inspection by DOT guidelines Check Vehicle for damage Operate windshield Wipers/washer, running lights and turn signals Inspect tires for defects and proper inflation. Start and run unit to reach normal operating temperature. Check all lights, warning devices, and signaling equipment. Check radio volume and frequency. Inventory and check all SCBA's (fill if below 4500 psi.), face pieces, PASS devices, and seat belts. Test AED Check portable fire extinguishers. Inspect cab area for map books, hand lights, portable radio(s), Knox box key, and Personnel Accountability Tags. Visual Inventory of portable equipment. Secure hose loads. Check water and foam tanks. Engage pump and pump accessories. Run gasoline-powered portable equipment for 10 mins. on M-W-F. Set up aerial device. Inspect outriggers and pins. Elevate, rotate, and extend aerial. Operate diesel generator for at least 10 mins. 	<ul style="list-style-type: none"> Check battery terminals, clean as required. Check for correct tire pressure. Rotate AED and suction unit batteries. Operate all pump gates, drains, and caps. Lubricate as required. Clean and operate all hand line nozzle gates. Actuate pump primer. Test CO monitoring equipment. Exercise discharge relief valve. Verify unit inventory. Perform weekly SCBA check and inspection Perform a static brake test. Tighten loose fasteners. Clean all glass. Clean cab and crew areas. Clean portable equipment as required. Operate any electrically powered equipment and accessories. Operate all hydraulic rescue tools. Check fluids on portable generator(s). Clear any repaired defects. 	<ul style="list-style-type: none"> Remove all equipment from compartments, cab wells, map book boxes, etc. All compartments are to be cleaned, dried, and reassembled. Check for frayed wiring, compartment lighting, condition of door seals, hinges, strikers, and latches. Replaced damaged maps as necessary. Perform a monthly SCBA inventory. Remove any ladders, clean completely, and lubricate slides and hardware with Moly-lube. Perform a monthly AED check. Engage pump primer. Flow foam. Flush per instructions. Check velcro on radio head sets. Back flush pumps

Apparatus driver must sign each day. Station officer must sign for completion of weekly and monthly PM's. Initialing indicates that the apparatus was checked according to above guidelines.

Under Type: D = Daily; W = Weekly; M = Monthly; OOS = Out of Service

Initial	Type	Initial	Type	Initial	Type	Initial	Type	Initial	Type	OIC Initials	Date
1		8		15		22		29		Monthly	
2		9		16		23		30		Week 2	
3		10		17		24		31		Week 3	
4		11		18		25				Week 4	
5		12		19		26		Mileage last		Week 5	
6		13		20		27		Mileage 1st			
7		14		21		28		Total Mileage			