<b>DRIVER'S</b>	DAILY	APPARATUS	CHECKLIST
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I.D. No.	Date:	_		
Odometer Reading;	Hour Meter Reading:			
	Tiour mouth reading.			
Onan I.D.	Onan Hour Meter:			
Items to Be Checked:		Pass	Fail	
Aerial device operates properly				
Auxiliary equipment in place and operational				
Back-up alarm operates properly				
Battery condition				
Brake fluid level				
Brakes operate properly (service and parking)				
Coolant level				
Doors and compartments open and close properly				
Fuel Level				
Lights / turn signals / clearance lights / horn				
Oil level				
Pump Operates properly				
Radios /cellular phones				
Spare tire condition				
Steering, suspension, drive components Tire pressure: LF: RF: LR: F	RR:			
Transmission level	KK			
Check underside of vehicle and floor for fluid leaks				
Upholstery condition				
Warning devices				
Washed				
Wheels, lug bolts				
Windshield wipers / washer fluid level				
Comments / missing equipment / repairs needed:				
Commente / massing equipment / repuis needed				
Firefighter's signature:	Station Chief's signature:			