UNC Charlotte Environmental Health and Safety Aerial Lift / Mobile Elevated Work Platform (MEWP)																	
Depa	ertment Name:	Make/Model:	Pre-Use Inspection Form Aerial Lift / Mobile Elevated Work Platform (MEWP) Type:												Month/Year:		
- Sparting in a second and in		☐ One-Man Lift w/o outriggers (Group A, Type 3) ☐ One-Man Lift w/outriggers (Group A, Type 1) ☐ Scissor Lift (Group A, Type 3) ☐ Rough Terrain Scissor Lift (Group A, Type 3)															
				☐ Coi	mpact Cra	wler (Gro	oup B, Ty	/pe 1)		l Vehicle	Mounted	l Lift -Bucke	et Truck (G	Group B, Ty	. ,		
Instructions: Complete the general information			☐ Articulating Boom Platform (Group B, Type 3) ☐ Extensible or Telescoping Boom Lift (Group B, Type 3) 1, visual walkaround and test control sections. Mark the corresponding day of the month with an "✓= Pass X = Fail													Fail	
N/A=Not Applicable . If any item is marked with an (X) you must tag the Aer and report it to your supervisor.																	
Inspection items			Day of the Month														
√= F	Pass X = Fail N/A	A=Not Applicable	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	Visual Wal																
Conduct a thorough walk-around the aerial lift / mobile elevated work platform (MEWP) and work location before operating the lift for drop-offs, slopes, holes, overhead obstructions, pedestrians, electrical hazards and weather conditions.																	
Check the name/date plate and owner's manual.																	
Check for personal protective devices that will be worn while operating/occupying the lift, including the guardrail system, anchorage and mounting.																	
Look for loose bolts, leaks, and damage wires or cables.																	
Check the condition of tires, work platform, and outriggers for damage.																	
Test Controls																	
in	heck operating and cluding brake opera erformance.	emergency controls, ition and															
	heck audible and viseacons.	sual alarms and															
OPERATOR INITIALS																	
COM	IMENTS:			l	1	I	1	ı	l	l	I	1	I	I	I	ı	l

UNC Charlotte Environmental Health and Safety Aerial Lift / Mobile Elevated Work Platform (MEWP)																	
Department Name: Make/Model:			□ One-Man Lift w/o outriggers (Group A, Type 3) □ One-Man Lift w/outriggers (Group A, Type 1) □ Scissor Lift (Group A, Type 3) □ Rough Terrain Scissor (Group A, Type 3) □ Compact Crawler (Group B, Type 1) □ Vehicle Mounted Lift -Bucket Truck (Group B, Type 2 & 3)												Month/Year:		
□ Articulating Boom Platform (Group B, Type 3) □ Extensible or Telescoping Boom Lift (Group B, Type 3) Instructions: Complete the general information, visual walkaround and test control sections. Mark the corresponding day of the month with an "✓= Pa N/A=Not Applicable. If any item is marked with an (X) you must tag the Aerial Lift / Mobile Elevated Work Platform (MEWP) out of service (sign over and report it to your supervisor.													ole)				
Inspection items ✓= Pass X = Fail N/A=Not Applicable		Day of the Month 16															31
Visual Walk Conduct a thorough wand work location before for drop-offs, slopes, hobstructions, pedestriate hazards and weather Check the name/date manual. Check for personal prowill be worn while operlift, including the guard anchorage and mount Look for loose bolts, lewires or cables. Check the condition of and outriggers for dangers.	valk-around the aerial vork platform (MEWP) ore operating the lift noles, overhead ans, electrical conditions. plate and owner's otective devices that trating/occupying the drail system, sing. eaks, and damage of tires, work platform, nage.																
 Test Cor Check operating and of including brake operating performance. Check audible and vis beacons. OPERATOR INITIALS	emergency controls, tion and																
COMMENTS:																	