|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | PO Box 299  Oberon NSW  2787  ABN 98 107 506 208 | Version | Author | Reviewed | Reference |
| **A -** Rev 1 | SM | SEC/TM | **SOP-001B** |
| 08/09/12 | | | |
| **TMV/Section Car - Safety Check** | | | |

**Appendix “B”: SECTION CAR SAFETY CHECK**.

# (Complete in duplicate – driver retains Original)

Authority #……………….. Date Issued……………….. Time Issued…………

Before use, the following safety checks were carried out to the best of my ability and I

Consider that the Section Car is in safe working order ………………………………

Signed – Driver

[TICK IF SATIFACTORY] Tick

1. The RED danger flag is in place on the Section Car. …….
2. The fire extinguisher is in place and within use-by date. …….
3. All crew are financial Members of OTHR. …….
4. All crew are wearing PPE including SAFETY VESTS. …….
5. The total number of crew is 4 or less. …….
6. There are no fuel leaks. …….
7. Wheels appear secure and not fractured. …….
8. There are no obviously damaged mechanical parts. …….
9. The brakes check OK when tested. …….
10. The rotating safety beacon is tested and switched ON. …….
11. The horn is tested and working. …….
12. Lights (if fitted) are working. …….
13. Tools and equipment are loaded safely and suitably restrained. …….
14. All crew can be safely seated within the confines of the car. …….
15. Other personnel are made aware that operations are about to commence. …….

**ORIGINAL TO BE RETURNED  
 TO THE DOCUMENT CONTROLLER**