

HORRY COUNTY FIRE/RESCUE

Ambulance Maintenance Check-Off Sheet

APPARATUS NUMBER: _____ ASSET NUMBER: _____ MILEAGE _____

Daily Checks				Good	Bad	Comments	Daily Checks				Good	Bad	Comments			
1	Apparatus Appearance							14	SCBA							
2	Engine Oil Level							15	Portable Handlights							
3	Coolant Level							16	Medical Equipment							
4	Other Fluid Levels							17	Tires							
	-Power Steering Fluid							18	Water Cooler							
	-Transmission Fluid							19	Apparatus Inventory							
	-Brake Fluid								-Use Inventory Sheet							
5	Fuel Level							20	Wash Apparatus							
6	Battery Voltage															
7	Start Engine							Weekly Checks								
8	Parking Brake							1	Engine Compartment							
9	Emergency Equipment								-Check Belt Condition							
	-Emergency Lights								-Check Belt Tension							
	-Siren (Electronic)								-Check Fluid Leaks							
	-Air Horns								-Check Battery Condition							
10	Headlights & Turn Signals							2	Fire Extinguishers							
11	Radios							3	Windshield Wipers							
	-Mobiles							4	Compartment Doors							
	-Portables							6	Decon/Clean Equipment & Supply							
12	Cab								Compartments							
13	Inverter															

Ambulance Crew Member Signature: _____ **Date:** _____