

SMA USE ONLY			
PLANT NO:		EXPIRY DATE:	

Plant Owner/Supplier to Complete			
Project:	B2PB (Burleigh to Palm Beach)		
Company:	EPH Queensland PTY LTD		
Make/Model:		Plant/Unit No:	
Registration No./Expiry:			
Build Date:			
Current Hours/Kms:		Hours/Kms of the Last Service:	
Date of the Last Service:			
When is the Next Service Due?			
Trailer Registration No./Expiry:			
Trailer – State Registered:			

The Following Items are Mandatory Requirements for this Project		
Documentation & Records Required	To be Completed by Supplier	SMA Verified
Operation & Maintenance Manual with plant & legible	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Daily Pre-Start Logbook supplied with plant	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Service Records supplied with plant	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Vehicle and Trailer Registration	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Plant Hazard & Risk Assessment supplied with vehicle	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Weed Hygiene Declaration supplied with vehicle	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Plant and Asset Standards requirements met (reference information)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Visual Inspection	To be Completed by Supplier	SMA Verified
All Safety Guards fitted & in serviceable condition	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Access/ Egress points allow for 3 points of contact	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Vehicle cleaned of weed & pest infestations	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Battery Isolator fitted & in serviceable condition (Lockable)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Rated Capacity Decal (KG) fitted & legible (as required in Plant Minimum Requirements Matrix)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Fire Extinguisher fitted & charged (Test date must be within last 6 months)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
All Windows/ Glass fitted & in serviceable condition	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Controls Labelled & legible	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Seat & Seatbelt fitted & in serviceable condition	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Operational Inspection	To be Completed by Supplier	SMA Verified
Reverse Camera fitted and operational (as required in Plant Minimum Requirements Matrix) TANDEMS ONLY	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Reverse Lights fitted and operational (as required in Plant Minimum Requirements Matrix)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Reverse Alarms fitted and operational (as required in Plant Minimum Requirements Matrix)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>
Fall protection for service areas (incl. delivery trays/beds where workers need to access) (as required in Plant Minimum Requirements Matrix)	N/A	N/A
Hose burst protection valves (as per AS1418.8) (as required in Plant Minimum Requirements Matrix)	N/A	N/A

The Following Items are Mandatory Requirements for this Project		
Emergency Shutdown System (E-Stop) (as required in Plant Minimum Requirements Matrix)	N/A	N/A
Remote operation control system fitted and operational (as required in Plant Minimum Requirements Matrix)	N/A	N/A
Battery Isolator (lockable) fitted and operational (as required in Plant Minimum Requirements Matrix)	Yes <input type="checkbox"/>	Yes <input type="checkbox"/>

Owner/Supplier to undertake the following Inspections		
Plant Requirement	Tick if Acceptable	Comments or Defects
Truck & Dog/Semi Tipper/Trailer/Tilt Tray/Truck Mounted Equipment		
No Oil/ Fuel/ Coolant Leaks	<input type="checkbox"/>	
Hydraulic System including Hoses & Cylinders in serviceable condition	<input type="checkbox"/>	
Oil Levels Correct	<input type="checkbox"/>	
Air System including Tank Condition/ Leaks/ Drain Valves/ Hoses/ Piping/ Compressor in serviceable condition	<input type="checkbox"/>	
Electrical System including Wiring Condition/ Battery/ Lights – in serviceable condition	<input type="checkbox"/>	
Tyres, Wheel Nuts, Locks and Rims in serviceable condition	<input type="checkbox"/>	
Cracking/ Excessive Wear in Chassis	<input type="checkbox"/>	
Grease Lines/ Nipples fitted and in serviceable condition	<input type="checkbox"/>	
Steering System including Cylinders & Linkages in serviceable condition	<input type="checkbox"/>	
Service/ Park Brake serviceable condition	<input type="checkbox"/>	
Tow Hitch Secure and serviceable condition	<input type="checkbox"/>	
Tailgate Locks (where applicable) fitted and in serviceable condition	<input type="checkbox"/>	
Body/ Tray in serviceable condition including Pivots/ Slides	<input type="checkbox"/>	
Tarps (where applicable) fitted and serviceable condition	<input type="checkbox"/>	
Gates (where applicable) serviceable condition	<input type="checkbox"/>	
Ramps (where applicable) serviceable condition	na	
Tank/ Bowl Mounted Securely (where applicable) and serviceable condition	na	
Chutes (where applicable) serviceable condition	na	
Water Pump (where applicable) serviceable condition	na	
Operational Checks including Safety Devices		
Engine Operation Noise/ Smoke	<input type="checkbox"/>	
Controls Condition and Operation	<input type="checkbox"/>	
Air Conditioner/ Heater/ Fan Operation	<input type="checkbox"/>	
Drive Train Operation Forward/ Reverse and Upshift/ Downshift	<input type="checkbox"/>	
Hydraulic/ Steering System Operation	<input type="checkbox"/>	
Braking System Operation Service/ Park	<input type="checkbox"/>	
Window Wiper/ Washer Operation	<input type="checkbox"/>	

I / We are fully aware of our responsibilities under the Workplace Health and Safety Act 2011 in relation to plant requirements, and the information supplied above is true and correct. By signing below, I / we accept that this plant item has been checked as suitable for use at this project.

Owner / Mechanic Declaration

Signature:	
Qualifications or Title:	
Date:	

(SMA Use Only) Plant Inspected by:

Name:	
Signature:	
Date:	