|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Regular servicing as per maintenance checklist/major or minor repairs** | **Maintenance performed by company/business/individual** | **Time taken** | **Cost** | **Tag-out (if required)** | **Tag removed and checked by** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

## **Maintenance record – equipment/machinery**

[WHS legislation – Plant Code of Practice 2013](https://wcq-search.clients.squiz.net/s/redirect?collection=wcq-internet&url=https%3A%2F%2Fwww.worksafe.qld.gov.au%2F__data%2Fassets%2Fpdf_file%2F0006%2F58173%2FManaging-risks-of-plant-COP-2013.pdf&index_url=https%3A%2F%2Fwww.worksafe.qld.gov.au%2F__data%2Fassets%2Fpdf_file%2F0006%2F58173%2FManaging-risks-of-plant-COP-2013.pdf&auth=d09ATl1af7jCOXCCQvM0dw&profile=_default&rank=1&query=plant+code+of+practic) outlines that workers (staff members) and others (students, maintenance contractors) using plant/equipment should be trained and provided with information and instruction on:

* safe work practices and operating procedures
* maintenance procedures.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **The below checks are recommended for equipment prior to or during a unit of work where the equipment will undergo moderate to heavy use.** | | | | | | |
| Equipment/machine checks | **Date** | / / | / / | / / | / / | **Follow-up actions** |
| **Signature** |  |  |  |  |
|  | Tick or comment  ✓ | Tick or comment  ✓ | Tick or comment  ✓ | Tick or comment  ✓ | E.g. cracked blade replaced 03/18  John Smith |
| Visually check that **all guards** are in sound condition. | |  |  |  |  |  |
| Ensure that all switches, kill switch, zip starter, throttle control, etc. are in sound condition. | |  |  |  |  |  |
| Verify that you have enough fuel to complete the job. | |  |  |  |  |  |
| Visually check that the cultivator **rotary blades** are in sound condition. | |  |  |  |  |  |
| Visually check that **no person or animal** can be endangered when the rotary cultivator is operated. | |  |  |  |  |  |
| Wear appropriate **personal protective equipment** ensuring that it is in sound condition. | |  |  |  |  |  |
| Remove any build-up of **foreign material** from in and around guards and motor. | |  |  |  |  |  |
| Check that the cultivator **rotary blades** are in sound condition and if damaged repair or replace. | |  |  |  |  |  |
| Lightly **lubricate** to manufacturer’s specification. | |  |  |  |  |  |
| Other: | |  |  |  |  |  |
| Other: | |  |  |  |  |  |
| Other: | |  |  |  |  |  |
| Other: | |  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **End of semester checks** | **Date** | / / | / / | **Follow-up actions** |
| **Signature** |  |  |
| **Tick or comment****✓** | **Tick or comment****✓** | E.g. blade and pulley alignment adjusted 02/18  John Smith |
| **Sem 1** | **Sem 2** |
| Check the availability of **spare parts** e.g. blades, air filters, oil filters, spark plugs etc. | |  |  |  |
| **Lubricate** all points in accordance with the manufacturer's specification. | |  |  |  |
| Check the **throttle control**, zip starter, handle controls mechanism etc. are in sound condition if damaged repair or replace. | |  |  |  |
| Check the **tyres** and tighten wheel nuts. | |  |  |  |
| Check that the **cultivator blades** and **guards** are in good sound condition. If damaged repair or replace. | |  |  |  |
| Check the **gearbox** and top up the oil if required. | |  |  |  |
| Check the **muffler**, **spark plug** and replace if damaged. | |  |  |  |
| Check the **motor** and service as required to manufacturer specifications. | |  |  |  |
| Check the anti-vibration rubber mounts (if fitted) are in good condition. | |  |  |  |
| Other: | |  |  |  |
| Other: | |  |  |  |
| Other: | |  |  |  |
| Other: | |  |  |  |

|  |  |
| --- | --- |
| **Annual check *Date***  ***Signature*** | / / |
|  |
| **Tick or comment** **✓** |
| **Review safety operating procedure** and **update** if necessary. |  |
| **Other:** |  |
| **Other:** |  |
| **Other:** |  |
| **Other:** |  |
| **Other:** |  |
| **Other:** |  |
| **Follow-up actions** e.g. Yellow line for operator zone repainted  14/12 John Smith | |
|  | |
|  | |
|  | |
|  | |
|  | |
|  | |