

MEWP Pre-use Inspection

A MEWP pre-use record with machine and operator details, visual and functional checks, operating-area constraints, rescue arrangements and defects.

1. Record details and scope

Project

Filled in from the project in SiteSurvey.

Site or premises address

Client or organisation

Record date *

Person completing the record *

This is a trained operator pre-use record. It is not a thorough examination certificate, rescue training or a substitute for the manufacturer instructions and site assessment.

HSE recommends daily visual checks, inspections and servicing based on the manufacturer instructions and the risks of the MEWP. HSE also calls for a rescue plan that is practised and someone on the ground who knows how to operate ground controls. A pre-use check is separate from formal inspection or thorough examination.

2. Machine and operator

MEWP asset ID, make and model *

Scan the machine data plate

Scanned in the SiteSurvey app. On paper, write the numbers: serial number, model number, asset number.

MEWP type and operating configuration

Trained and authorised operator *

Manufacturer instructions reference *

Examination and maintenance references

Ground person familiar with rescue and lowering arrangements *

3. Pre-use checks

Visible structure, platform, guardrails and access checked * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Tyres or tracks, leaks and power source checked * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Controls, emergency stops and lowering checked to instructions * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Ground conditions, overhead hazards and work area assessed * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Load limits and operating restrictions reviewed * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Assessed fall protection and rescue arrangements available * (choose one)

☐ Acceptable ☐ Action needed ☐ Not checked ☐ Not applicable

Action, limitation or reason not applicable * (if applicable)

Supporting photos (photos: attach, or note the file names)

4. Defects and restrictions

Defects and limitations

Identify the component and symptom without attempting a diagnosis beyond the check. Record the operating restriction and report reference separately.

Steps taken to prevent unsafe use

Defects reported to

Site rescue plan reference

Operator and ground-person briefing record

5. Actions and review

Are further actions required? * (choose one)

☐ Yes ☐ No

Further action (copy this block for each one; if applicable)

Action and evidence reference *

Person responsible *

Target date

Action status * (choose one)

☐ Open ☐ In progress ☐ Completed

Completion evidence * (if applicable)

Outstanding limitations and information to pass on

Record status * (choose one)

☐ Ready for review ☐ Further work needed ☐ Work or use stopped

Reviewed by

Review date

Author signature *

Signing records the information entered. It does not itself certify legal compliance, remove a limitation or authorise unsafe work.