

Coates Inspection Checklist							Photos																																																																																																												
Compactors																																																																																																																			
See Compactor Photo Log for required pictures					Asset # <u>1190242</u>																																																																																																														
General Information: *** Copy Data Plate information in this section *** Make/ Model Year: <u>WACKER BTLX 2017</u> Serial Number: <u>24405464</u> Engine / Motor - Make / Model: <u>KOHLER</u> Engine Serial Number: <u>KDL1003 EPA</u> Meter Reading: <u>610</u>							<input type="checkbox"/> Data Plate																																																																																																												
Comments: 																																																																																																																			
Features: Ride on: <input type="checkbox"/> Static <input type="checkbox"/> Vibratory Walk Behind: <input type="checkbox"/> Single Drum <input checked="" type="checkbox"/> Double Drum Smooth Padfoot: <input type="checkbox"/> Pneumatic: <input checked="" type="checkbox"/>							4-Corner Photos <input type="checkbox"/> Left-Front Corner <input type="checkbox"/> Left-Rear Corner <input type="checkbox"/> Right-Front Corner <input type="checkbox"/> Right-Rear Corner <input type="checkbox"/> Damage <input type="checkbox"/> Damage																																																																																																												
Drum width at the widest point: <u>380mm</u>		Blade width at the widest point: <u>400</u>																																																																																																																	
Overall Appearance: <table border="0" style="width:100%;"> <tr> <td></td> <td style="text-align: center;">Good</td> <td style="text-align: center;">Fair</td> <td style="text-align: center;">Poor</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Control Station/Operator Station</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sheet metal/Fiberglass Condition</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Paint</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Lights</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> <td></td> </tr> </table>								Good	Fair	Poor				Control Station/Operator Station	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				Sheet metal/Fiberglass Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				Paint	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				Lights	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																													
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Operator Station <table border="0" style="width:100%;"> <tr> <td></td> <td style="text-align: center;">Good</td> <td style="text-align: center;">Fair</td> <td style="text-align: center;">Poor</td> <td style="text-align: center;">N/A</td> <td>Comments</td> <td></td> </tr> <tr> <td>Seat Condition</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Steering Controls</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Control Lock Lever</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Powertrain Controls</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> </tr> <tr> <td>Hydraulic Controls</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td></td> </tr> </table>								Good	Fair	Poor	N/A	Comments		Seat Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Steering Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Control Lock Lever	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			Powertrain Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Hydraulic Controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/> Hour Meter <input type="checkbox"/> Controls <input type="checkbox"/> Gauges <input type="checkbox"/> Damage <input type="checkbox"/> Damage																																																																		
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Engine Power: Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Does it start? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Did it need to be jumped? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Acceptable Power: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Unusual Noises: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Comments:							<input type="checkbox"/> Right Side hood open <input type="checkbox"/> Left Side hood open																																																																																																												
Transmission Transmission Type: <u>Manual</u> (F) <u>Hydrostatic</u> (R) <u>Powershift</u> (X) Other _____ Number of Speeds: _____ <table border="0" style="width:100%;"> <tr> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td style="text-align: center;">N/A</td> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td>Forward</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Parking Brake</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Differential (front)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Reverse</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Brakes'</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Clutch</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Shifting</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Differential (rear)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Final Drives</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>								Yes	No		Yes	No	N/A		Yes	No	N/A	Forward	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Parking Brake	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Differential (front)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reverse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brakes'	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clutch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shifting	<input type="checkbox"/>	<input type="checkbox"/>	Differential (rear)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Final Drives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																	
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Hydraulics <table border="0" style="width:100%;"> <tr> <td></td> <td style="text-align: center;">Operates</td> <td style="text-align: center;">Leaks</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">No</td> <td style="text-align: center;">N/A</td> <td>Comments:</td> </tr> <tr> <td>Pump</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td><u>OIL LEAKS</u></td> </tr> <tr> <td>Hoses</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Cylinders</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Drive Motors</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Brakes</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>Parking Brakes</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> </table>								Operates	Leaks						Yes	No	Yes	No	N/A	Comments:	Pump	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>OIL LEAKS</u>	Hoses	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Cylinders	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Drive Motors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Brakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Parking Brakes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Pump <input type="checkbox"/> Cylinders <input type="checkbox"/> Drive Motor <input type="checkbox"/> Damage <input type="checkbox"/> Damage <input type="checkbox"/> Damage																																																				
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