



Preoperational Checklist for Plants

Form must be attached to the Warranty Registration Form located at <https://dealers.aggretek.com/limited-warranty-registration/>

IMPORTANT

Warranty will be void if this registration is not returned within ten (10) day after the equipment is put into service.

Date Put Into Service	Hours on Unit	Sale <input type="checkbox"/>	Lease <input type="checkbox"/>	Rental <input type="checkbox"/>	Unit Serial Number	Engine Serial Number
Job Order	Dealer Order Number			Unit Model Number	Engine registered with manufacturer <input type="checkbox"/>	
Dealer Name	Dealer Signature			City	State	Zip
Owner/Lessee	Signature			City	State	Zip
Owner/Lessee Address	Phone Number	E-Mail			Title	

NOTICE

Complete the Preoperational Check as part of warranty registration. Complete the pre-operational check any time equipment moves to a new site, changes renters, or has been in storage for an extended period. Check each component to insure that it is in operational condition. This check should include, but not be limited to the following items listed below.

Mark the appropriate yes/no column indicating that the following items have been checked or reviewed.

<u>Safety Checks</u>	<u>Okay</u>	<u>Adjust</u>
1. Have lockout/Tagout practices been reviewed with the customer?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the operator been advised about proper safety precautions regarding the following:		
a. Lockout/Tagout	<input type="checkbox"/>	<input type="checkbox"/>
b. Hearing protection	<input type="checkbox"/>	<input type="checkbox"/>
c. Hard Hat Protection	<input type="checkbox"/>	<input type="checkbox"/>
d. Eye Protection	<input type="checkbox"/>	<input type="checkbox"/>
e. Loose Clothing	<input type="checkbox"/>	<input type="checkbox"/>
f. Safety Boots	<input type="checkbox"/>	<input type="checkbox"/>
3. Has hoisting and handling safety been reviewed by the customer?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have flammable and combustible liquid storage and handling safety been reviewed by the customer?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have safe transportation instructions been reviewed by the customer?	<input type="checkbox"/>	<input type="checkbox"/>
6. Has the customer been advised that guarding may be required in addition to the factory-supplied guards to comply with OSHA, MSHA, and local regulations?	<input type="checkbox"/>	<input type="checkbox"/>
7. Has the customer been advised of hazards, and requirements of electrical systems, such as grounding rods, and layout of power lines?	<input type="checkbox"/>	<input type="checkbox"/>
8. Has the customer been instructed about fall protection requirements?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has the customer been advised of the dangers of operating or working near machinery under the influence of alcohol and drugs?	<input type="checkbox"/>	<input type="checkbox"/>
10. Has the customer been advised of the location of emergency stops?	<input type="checkbox"/>	<input type="checkbox"/>
11. Are warning horns functioning properly?	<input type="checkbox"/>	<input type="checkbox"/>
12. Has the customer been advised of the hazards of welding on the machinery?	<input type="checkbox"/>	<input type="checkbox"/>
13. Has the customer been instructed of good housekeeping practices?	<input type="checkbox"/>	<input type="checkbox"/>
14. Customer acknowledges and understands that adjusting relief pressures beyond factory settings, tampering with, bypassing, or disabling interlocks, or safety circuits will void factory warranty.	<input type="checkbox"/>	<input type="checkbox"/>

<u>Plant Pre-Operation Checks</u>	<u>Okay</u>	<u>Adjust</u>
1. Has the 1 year/2000 hour Warranty Policy been reviewed with the customer?	<input type="checkbox"/>	<input type="checkbox"/>
2. Was the plant complete upon arrival? (Parts missing)	<input type="checkbox"/>	<input type="checkbox"/>
3. Were conveyors free from damage or defects upon arrival?	<input type="checkbox"/>	<input type="checkbox"/>
4. Was the Screen free from defects upon arrival?	<input type="checkbox"/>	<input type="checkbox"/>
5. Was the Cone Crusher free from defects upon arrival?	<input type="checkbox"/>	<input type="checkbox"/>
6. Has a consumable items list been provided to the customer (oils, filters, belts, etc)?	<input type="checkbox"/>	<input type="checkbox"/>
7. Has the customer been instructed on the operation of the leveling legs?	<input type="checkbox"/>	<input type="checkbox"/>
8. Has the customer been instructed on the operation of the self-steering axles?	<input type="checkbox"/>	<input type="checkbox"/>
9. Has the customer been instructed on the operation of the air bag suspension system?	<input type="checkbox"/>	<input type="checkbox"/>
10. Has the customer been instructed on travel and set-up controls, indicators and gauges?	<input type="checkbox"/>	<input type="checkbox"/>
11. Has the customer been advised of the locations, and uses of the battery disconnect switches?	<input type="checkbox"/>	<input type="checkbox"/>
12. Has the customer been instructed how to change dust suppression system water filters and the need for draining in cold weather?	<input type="checkbox"/>	<input type="checkbox"/>
13. Has the dust suppression system been connected, adjusted, and is it functioning properly?	<input type="checkbox"/>	<input type="checkbox"/>
14. Has the dust suppression system been adjusted to meet the customer's needs?	<input type="checkbox"/>	<input type="checkbox"/>

<u>Engine Checks (If Equipped)</u>	<u>Okay</u>	<u>Adjust</u>
1. Has the diesel engine oil level been checked?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has the diesel engine coolant level been checked (water: coolant 50/50 mix)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Has the customer been instructed on Priming the fuel pump if necessary? (Caterpillar only)	<input type="checkbox"/>	<input type="checkbox"/>
4. Has the fuel water separator been drained?	<input type="checkbox"/>	<input type="checkbox"/>
5. Has the charge air cleaner and intake evacuator valve been cleaned?	<input type="checkbox"/>	<input type="checkbox"/>
6. Was the air intake restriction indicator checked?	<input type="checkbox"/>	<input type="checkbox"/>
7. Has the customer been advised of potentially frequent air filter changes depending on the dust levels present?	<input type="checkbox"/>	<input type="checkbox"/>
8. Has the hydraulic oil level been checked?	<input type="checkbox"/>	<input type="checkbox"/>
Has the belt drive and sheaves been inspected?	<input type="checkbox"/>	<input type="checkbox"/>

The safe operation of this product was explained and a complete operator's manual was with the product.

If adjustments made please note change: _____

Date Inspection Completed _____

Inspector's Signature _____



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Engine Checks (If Equipped)

- 9. Has the hydraulic hoses and connections been visually inspected?
- 10. Has the engine fuel level been checked?
- 12. Have oil samples been taken?

Okay Adjust

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Conveyor Checks

- 1. Have all gear reducers been checked/filled to the proper oil level?
- 2. Was the customer shown location of grease points and lubrication intervals?
- 3. Have all conveyor hoses, lines and belts been visually inspect for leaks, or damage?
- 4. Have all conveyor belts been checked for tools and any foreign objects?
- 5. Inspect all guards. Are they in place and not interfere with any moving parts?
- 6. Have conveyors been calibrated? (Courtesy)
- 7. Has conveyor direction of rotation been determined?
- 8. Are all conveyors level and able to travel stacking paths without spillage, interference or damage?
- 9. Has the customer been instructed on proper belt tracking procedure?
- 10. Has spillage been avoided to the extent possible?

Okay Adjust

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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