



AUTHORIZED DEALER NAME and ADDRESS:	USER/OWNER NAME and ADDRESS:

NAME of QUALIFIED TECHNICIAN:	MOTORIZED UNIT MODEL and SERIAL NUMBER:	DATE of INSPECTION:



Each Hydro Mobile motorized unit and its accessories must be submitted to an annual inspection. Use the spaces below to monitor inspections that need to be performed every year. Use the Notes and Comments form to indicate any discrepancy or any item found to be not acceptable. Any discrepancy must be reported and appropriate corrective action must be taken immediately. Corrective actions must be performed by a qualified technician. "Qualified" means a person who, by possession of a recognized degree, certificate or professional standing, or who by extensive knowledge, training and experience, has successfully demonstrated the ability to solve or resolve problems relating to the subject matter, the work or the project. Only a qualified person on the specific make and model of the Hydro Mobile equipment is allowed to perform maintenance inspections and repairs on Hydro Mobile units according to the guidelines, instructions, warnings and methods set out in the owner's manuals and Hydro Mobile training courses.

It is recommended to use replacement parts manufactured by or recommended by Hydro Mobile. The use of substitution parts could not only void the warranty covering this motorized unit and its components but cause serious damages that could lead to injury or death. It is recommended to replenish and grease components only with fluids and lubricants recommended by Hydro Mobile.

Annual inspections must be performed by a qualified technician (see above).

USE CHECK MARK FOR EACH ENTRY VERIFIED. IF NECESSARY, TAKE CORRECTIVE ACTION BEFORE INSERTING CHECK MARK.	OK	CORRECTED	N/A
BASE	SERIAL NUMBER (if applicable):		
1 Check condition of base outriggers (4x) and outrigger shims.			
2 Check squareness and alignment of the base as per technical procedure.			
3 Inspect base outriggers for any welding defects, damaged parts and excessive rust or corrosion.			
4 Inspect base structure for any welding defects, damaged parts or excessive rust or corrosion (RIGHT).			
5 Inspect base structure for any welding defects, damaged parts or excessive rust or corrosion (LEFT).			
6 Inspect center beam for any welding defects, damaged parts or excessive rust or corrosion.			
7 Inspect jack (4x or 8x, as applicable) gears and mechanism. Grease jack mechanism, if necessary.			
MOTORIZED UNIT STRUCTURE	SERIAL NUMBER (if applicable):		
8 Check integrity of engine/motor access panel.			
9 Check integrity of mast tie door and hinges (LEFT).			
10 Check integrity of mast tie door and hinges (RIGHT).			
11 Check integrity of walkway access door, hinges and locking mechanism.			
12 Check motorized unit structure for any welding defects, damaged parts or excessive rust or corrosion, and any sign of distortion.			
ACCESS WALKWAY and COMPONENTS	SERIAL NUMBER (if applicable):		
13 Check access walkway structure for any welding defects, damaged parts or excessive rust or corrosion.			
14 Check condition of safety straps.			
GAS ENGINE	SERIAL NUMBER (if applicable):		
15 Perform recommended maintenance on Honda engine as per instructions in Honda owner's manual.			
POWER PACK and HYDRAULIC COMPONENTS	SERIAL NUMBER (if applicable):		
16 Adjust engine RPM at full throttle and idle speed as per technical procedure.			
17 Check all hydraulic hoses and fittings for any leaks or signs of wear.			
18 Check choke actuation.			
19 Check condition and adjustment of hydraulic control cable.			
20 Check condition and adjustment of hydraulic control lever.			
21 Check electrical connection to the engine starter switch.			
22 Check electrical wiring and connections.			
23 Check engine control rods.			



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	OK	CORRECTED	N/A
POWER PACK and HYDRAULIC COMPONENTS	SERIAL NUMBER (if applicable):		
24 Check gasoline level. Replenish, if necessary.			
25 Check hydraulic oil level. Replenish, if necessary, with hydraulic oil recommended by Hydro Mobile.			
26 Check vibration insulator on power pack mounting.			
27 Clean battery connections and perform battery load test as per technical procedure.			
28 Perform charging system test on Honda engine as per technical procedure.			
29 Replace the hydraulic return filter.			
30 Test condition of hydraulic oil and replace, if necessary, with hydraulic oil recommended by Hydro Mobile. Replenish with recommended hydraulic oil if level is not appropriate. Replace hydraulic oil at least every two years with hydraulic oil recommended by Hydro Mobile.			

LIFTING MECHANISM - LEFT	SERIAL NUMBER (if applicable):		
31 Check all hydraulic hoses and fittings for any leaks or signs of wear.			
32 Check condition of cylinder guiding bar and springs.			
33 Check condition of each roller, roller pocket and shaft.			
34 Check cylinder hook, cam, locking mechanism and hardware.			
35 Check hydraulic cylinder for any leaks or damages.			
36 Check return mechanism of the secondary hook.			
37 Check rubber block under the cylinder hook. Replace if the rubber is worn.			
38 Check secondary hook, cam, locking mechanism and hardware.			
39 Clean excess grease off each roller.			
40 Grease each backup safety hook using Prolab GS1000 only, as recommended by Hydro Mobile.			
41 Grease each roller using Prolab GS1000 only, as recommended by Hydro Mobile.			
42 Inspect each backup safety hook. Clean grease off the safety hook. Replace hook and pivot bolt if any sign of engagement is detected.			

LIFTING MECHANISM - RIGHT	SERIAL NUMBER (if applicable):		
43 Check all hydraulic hoses and fittings for any leaks or signs of wear.			
44 Check condition of cylinder guiding bar and springs.			
45 Check condition of each roller, roller pocket and shaft.			
46 Check cylinder hook, cam, locking mechanism and hardware.			
47 Check hydraulic cylinder for any leaks or damages.			
48 Check return mechanism of the secondary hook.			
49 Check rubber block under the cylinder hook. Replace if the rubber is worn.			
50 Check secondary hook, cam, locking mechanism and hardware.			
51 Clean excess grease off each roller.			
52 Grease each backup safety hook using Prolab GS1000 only, as recommended by Hydro Mobile.			
53 Grease each roller using Prolab GS1000 only, as recommended by Hydro Mobile.			
54 Inspect each backup safety hook. Clean grease off the safety hook. Replace hook and pivot bolt if any sign of engagement is detected.			

GENERAL	SERIAL NUMBER (if applicable):		
55 Check all stickers and make sure they are in place and readable.			



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	OK	CORRECTED	N/A
GENERAL			
SERIAL NUMBER (if applicable):			
56 Inspect 84" (2,1 m) end guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion.			
57 Inspect 84" (2,1 m) guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion.			
58 Inspect door guardrails (2x) for any welding defects, damaged parts or excessive rust or corrosion.			
59 Inspect movable / adjustable guardrails (2x if equipped) for any welding defects, damaged parts or excessive rust or corrosion.			

TESTS to RUN (as per technical procedures)			
SERIAL NUMBER (if applicable):			
60 Perform travel test and validate operating pressure as per technical procedure.			
61 Test access walkway for proper operation and deployment.			
62 Test cylinder load holding capacity as per technical procedure.			
63 Test maximum admissible hydraulic operating pressure as per technical procedure.			

The undersigned certifies that this unit and its accessories have been properly inspected, in due time, that any discrepancy has been brought to the attention of the owner/user and that all discrepancies have been corrected prior to further use of this unit or its accessories.

Signature of QUALIFIED TECHNICIAN <small>IM2_MAINTANNUAL_0220 07 Feb 20</small>	Name of QUALIFIED TECHNICIAN (IN PRINT) <small>R02</small>	DATE OF INSPECTION
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M2 SERIES
MOTORIZED UNITS and ACCESSORIES

ANNUAL INSPECTION CHECKLIST
NOTES and COMMENTS



NAME of QUALIFIED TECHNICIAN:	MOTORIZED UNIT MODEL and SERIAL NUMBER:	DATE of INSPECTION:

DATE ENTERED	NOTE or COMMENT	CORRECTIVE ACTION REQUIRED	DATE OF REPORT TO OWNER/USER	DATE OF COMPLETION FOR CORRECTIVE ACTION

The undersigned certifies that this unit and its accessories have been properly inspected, in due time, that any discrepancy has been brought to the attention of the owner/user and that all discrepancies have been corrected prior to further use of this unit or its accessories.

Signature of QUALIFIED TECHNICIAN **Name of QUALIFIED TECHNICIAN (IN PRINT)** **DATE OF INSPECTION**
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