HYDRAULIC JACK INSPECTION CHECKLIST Format No. Rev. No. Rev. Date.												Inpaspages.com	
			Location / Area:		Inspection No.:								
			Month: Inspector Name:			& Sign							
Ch	ecklist								С. =Сс	omplied / N	.C=Not Co	mplied	
#		Inc	spection Criteria / Points		Date:		Date:		Date:		Date:		
<i>π</i>		Ins	pection criteria / Foints		C.	N.C.	C.	N.C.	C.	N.C.	C.	N.C.	
					1								
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#	Date Observation / Non Compliance Identified.					Action Taken Date							