

**REGION 6 VIPR PRE-AWARD
 FIRE EQUIPMENT INSPECTION CHECKLIST
 MULCHER/MASTICATOR**

COMPANY NAME: _____
 (Name as shown on VIPR Agreement)

EQUIPMENT MAKE: _____ **MODEL:** _____ **YEAR:** _____

VIN#: _____ **EQUIPMENT/Unit I.D.:** _____

Rental equipment No Yes **Rental Company Name:** _____

EQUIPMENT REQUIREMENTS – Mulcher/Masticator

Boom Mounted

Strip Mulcher

- | | |
|---|---|
| <input type="checkbox"/> Type 1: 156+ HP | <input type="checkbox"/> Type 1: 200-350 HP |
| <input type="checkbox"/> Type 2: 111-155 HP | <input type="checkbox"/> Type 2: 100-199 HP |
| <input type="checkbox"/> Type 3: 81-110 HP | <input type="checkbox"/> Type 3: 50-99 HP |
| <input type="checkbox"/> Type 4: 60-80 HP | |
- (HP based on 360° swing machine)*

Flywheel HP _____ HP Reference Document _____

Mulcher/Masticator Attributes:

Carrier Type:

- Rubber Tired (Wheeled)
- Track Mounted
- Cab leveling (boom mounted only)

Minimum Requirements

Yes No

Minimum Requirements		Yes	No
1	VIN # on equipment matches VIPR Agreement		
2	OF-296 Vehicle/Heavy Equipment Pre-Use Inspection completed		
3	Each tractor, skidder, swing yarder, log stacker, log loader and mechanical felling device, such as tree shears or feller-buncher, placed into initial service after February 9, 1995, shall be equipped with falling object protective structure (FOPS) and/or rollover protective structure (ROPS). The employer shall replace FOPS or ROPS which have been removed from any machine. Exception: This requirement does not apply to machines which are capable of 360 degree rotation. D.2.1.1		
4	Cab: Fully enclosed cab with polycarbonate or other material equivalent in protection to ¼ inch woven wire mesh material with openings no greater than 2 inches (5.08 cm) at its least dimension.		
5	All vehicles and equipment offered and under hire on this agreement shall contain a fire extinguisher, multi-purpose 2A 10BC, that is securely mounted to the vehicle and accessible by the operator. The fire extinguisher shall have a current annual inspection tag. D.2.1.2		
<i>Boom Mounted</i>			
7	Lighting; 2 forward facing (D.2.1.1(a)(6))		
<i>Strip Mulcher</i>			
8	Lighting; 2 forward facing, 2 rearward facing (D.2.1.1(a)(6))		

VEHICLE/HEAVY EQUIPMENT PRE-USE INSPECTION CHECKLIST

GENERAL EQUIPMENT INFORMATION	
1. INCIDENT NAME/NO.	2. RESOURCE ORDER NO.
3. CONTRACTOR NAME	
4. AGREEMENT NO.	5. EXPIRATION DATE
6. MAKE/MODEL	7. EQUIPMENT TYPE
8. VIN/SERIAL NO.	9. LICENSE NO./STATE

Section I—HEAVY EQUIPMENT	Acceptable	
	YES	NO
1. ROPS, roll-over protection system: Manufacturer-approved system secured to mainframe of tractor. Must include approved seat belts. *	<input type="checkbox"/>	<input type="checkbox"/>
2. Gauges and lights: mounted and function properly. *	<input type="checkbox"/>	<input type="checkbox"/>
3. Battery: check for corrosion, loose terminals, and hold downs.	<input type="checkbox"/>	<input type="checkbox"/>
4. Engine running: check oil pressure, knocks and leaks.	<input type="checkbox"/>	<input type="checkbox"/>
5. Sweeps, deflectors, safety screens to be checked *	<input type="checkbox"/>	<input type="checkbox"/>
6. Steering components: tight, free of play. *	<input type="checkbox"/>	<input type="checkbox"/>
7. Brakes: damaged, worn or out of adjustment. *	<input type="checkbox"/>	<input type="checkbox"/>
8. Exhaust system: equipped with a USFS-qualified spark arrester unless turbocharged. *	<input type="checkbox"/>	<input type="checkbox"/>
9. Fuel system: free of leaks and damage. *	<input type="checkbox"/>	<input type="checkbox"/>
10. Cooling system: full, free of leaks and damage. *	<input type="checkbox"/>	<input type="checkbox"/>
11. Fan and fan belts: check for proper tension. No fraying/cracks.	<input type="checkbox"/>	<input type="checkbox"/>
12. Engine support, equalizer bar, springs, main springs: check shackle bolts, shifted spring leaf. *	<input type="checkbox"/>	<input type="checkbox"/>
13. Belly plate, radiator guards: securely mounted and free from debris. *	<input type="checkbox"/>	<input type="checkbox"/>
14. Final drive, transmission and differential: check for dripping.	<input type="checkbox"/>	<input type="checkbox"/>
15. Sprocket and idlers: crack in spokes, sharp sprocket teeth, no welds.	<input type="checkbox"/>	<input type="checkbox"/>
16. Tracks and rollers: no broken pads, loose rollers, broken flanges. to be checked *	<input type="checkbox"/>	<input type="checkbox"/>
17. Dozer and assembly: trunnion bolts missing, cracks. *	<input type="checkbox"/>	<input type="checkbox"/>
18. Rear hitch (drawbar): serviceable, safe.	<input type="checkbox"/>	<input type="checkbox"/>
19. Body and cab condition: describe dents and damage.	<input type="checkbox"/>	<input type="checkbox"/>
20. Equipment cleanliness: all areas free of flammable materials, noxious weeds, and invasive species.	<input type="checkbox"/>	<input type="checkbox"/>
21. All hydraulic attachments: operate smoothly and all cylinders hold at extension; hose, lines, and pumps have no excessive wear and/or leaks.	<input type="checkbox"/>	<input type="checkbox"/>
22. Backup or travel alarm (minimum 87 db). *	<input type="checkbox"/>	<input type="checkbox"/>
23. Oil level and condition: full and clean.	<input type="checkbox"/>	<input type="checkbox"/>

Section II—ATTACHMENTS/PUMP/CHAINSAW/OR OTHER (Specify)	Acceptable	
	YES	NO
1. No missing/broken components, no loose hardware.	<input type="checkbox"/>	<input type="checkbox"/>
2. Sufficient fluid levels (oil, coolant, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
3. Cutting bar: straight, chain in good condition.	<input type="checkbox"/>	<input type="checkbox"/>
4. Cutting teeth: sharp, good repair.	<input type="checkbox"/>	<input type="checkbox"/>
5. Pump: builds pressure, no water or oil leaks.	<input type="checkbox"/>	<input type="checkbox"/>
6. Engine starts, idles, and shuts off with switch.	<input type="checkbox"/>	<input type="checkbox"/>

Section V—REMARKS
(Describe all unsatisfactory items and identify by line number)

10. PRE-USE INSPECTION	
<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected
MILES/HRS _____	DATE _____ TIME _____
Inspector's printed name _____	Title _____
Inspector's signature _____	

Section III—LIABILITY
The purpose of this checklist is to document pre-existing vehicle/equipment condition and to determine suitability for incident use. I hereby acknowledge full responsibility and liability for the operation and mechanical condition of the vehicle/equipment described herein.
Operator's printed name _____ Title _____
Operator's signature _____ Date _____

Section IV—TRANSPORT OR SUPPORT VEHICLES	Acceptable	
	YES	NO
1. "DOT" or CVSA inspection in the last 12 months (if required). *	<input type="checkbox"/>	<input type="checkbox"/>
2. Gauges and lights: mounted and function properly. *	<input type="checkbox"/>	<input type="checkbox"/>
3. Seat belts: operate properly for each seating position. *	<input type="checkbox"/>	<input type="checkbox"/>
4. Glass and mirrors, no cracks in vision. *	<input type="checkbox"/>	<input type="checkbox"/>
5. Wipers, washers, and horn operate properly. *	<input type="checkbox"/>	<input type="checkbox"/>
6. Clutch pedal: proper adjustment (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>
7. Cooling system: full, free of leaks and damage.	<input type="checkbox"/>	<input type="checkbox"/>
8. Fluid levels (e.g. oil) and condition: full and clean.	<input type="checkbox"/>	<input type="checkbox"/>
9. Battery: check for corrosion, loose terminals and hold downs.	<input type="checkbox"/>	<input type="checkbox"/>
10. Fuel system: free of leaks and damage. *	<input type="checkbox"/>	<input type="checkbox"/>
11. Electrical system: alternator and starter work.	<input type="checkbox"/>	<input type="checkbox"/>
12. Engine running: check oil pressure, knocks, and leaks.	<input type="checkbox"/>	<input type="checkbox"/>
13. Transmission: check for leaks.	<input type="checkbox"/>	<input type="checkbox"/>
14. Steering components: tight, free of play. *	<input type="checkbox"/>	<input type="checkbox"/>
15. Brakes: damaged, worn or out of adjustment. *	<input type="checkbox"/>	<input type="checkbox"/>
16. 4-Wheel drive: check transfer case, leaks (if applicable).	<input type="checkbox"/>	<input type="checkbox"/>
17. Drive line U-joints: check for looseness.	<input type="checkbox"/>	<input type="checkbox"/>
18. Suspension systems: springs, shocks, other. *	<input type="checkbox"/>	<input type="checkbox"/>
19. Differential(s): check for leaks.	<input type="checkbox"/>	<input type="checkbox"/>
20. Exhaust system: no leaks under cab or before turbo. *	<input type="checkbox"/>	<input type="checkbox"/>
21. Frame condition, body/bed properly attached. *	<input type="checkbox"/>	<input type="checkbox"/>
22. Tires/wheels (including spare and all changing equipment) sufficient load rating, tread depth, no major damage. *	<input type="checkbox"/>	<input type="checkbox"/>
23. Body and interior condition: describe and locate damage on back of page 3, Section IV, item 23.	<input type="checkbox"/>	<input type="checkbox"/>
24. Emergency equipment required. *	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguisher _____ Spare fuses _____ Reflectors _____	<input type="checkbox"/>	<input type="checkbox"/>
25. Operator(s) properly licensed. † Expiration Date _____	<input type="checkbox"/>	<input type="checkbox"/>
State _____ License No _____ Class _____	<input type="checkbox"/>	<input type="checkbox"/>
Endorsement _____ Med. Cert. Expiration Date _____	<input type="checkbox"/>	<input type="checkbox"/>

11. RELEASE	<input type="checkbox"/> No Damage/No Claim
MILES/HRS _____	DATE _____ TIME _____
Operator's printed name _____	Title _____
Operator's signature _____	Date _____
Inspector's printed name _____	Title _____

Contractor _____ Resource Order No. _____

Section IV - Transport and Support Vehicles

Motor vehicle parts and accessories must be in Safe Operating Condition At All Times, FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION (FMCSA) as prescribed by U.S. DEPARTMENT OF TRANSPORTATION FEDERAL HIGHWAY ADMINISTRATION PARTS 393 & 396, and NORTH AMERICAN UNIFORM OUT-OF-SERVICE CRITERIA, COMMERCIAL VEHICLE SAFETY ALLIANCE (CVSA).

REJECT IF: Parts and accessories covered in FMCSR part 393, 396 and/or CVSA North American Uniform Out-of-service Criteria are not in safe and proper operating conditions at all times. These include, but are not limited to the parts and accessories listed below.

2. Gauges and Lights (393.82, 393.11)

- ♦ Speedometer inoperative.
- ♦ All required lighting devices, reflectors and electrical equipment must be properly positioned, colored and working.

3. Seat Belts (393.93)

- ♦ Any driver or right outboard seat belt missing or inoperative.

4. Glass and Mirrors (393.60, 393.80)

- ♦ Any discoloration not applied by the manufacturer for reduction of glare.
- ♦ Any windshield crack over 1/4" wide.
- ♦ Any crack less than 1/4" wide that intersects with any other crack.
- ♦ Any damage 3/4" or greater in diameter.
- ♦ Any 2 damaged areas closer than 3" to each other.
- ♦ Any required mirror missing. One on each side, firmly attached to the outside of the vehicle, and so located as to reflect to the driver a view of the highway to the rear along both sides of the vehicle.
- ♦ Any required mirror broken.

5. Wipers and Horn (393.78, 393.81)

- ♦ Wiper blade(s) fail to clean windshield within 1" of windshield sides.
- ♦ Horn missing, inoperative or fails to give adequate/reliable warning signal.

10. Fuel System (393.65, 393.67)

- ♦ Fuel tank not securely attached to vehicle by reason of loose, broken or missing mounting bolts or brackets.
- ♦ Visible leak at any point.
- ♦ Fuel tank cap missing.

14. Steering (393.209)

- ♦ Steering wheel does not turn freely, has any spokes cracked through or is missing any parts.
- ♦ Steering lash not within parameters, see chart in FMCSA 393.209.
- ♦ Steering column is not secure.
- ♦ Steering system; any U-joint worn, faulty or repaired by welding.
- ♦ Steering gear box is loose, cracked or missing mounting bolts.
- ♦ Pitman arm is loose, or has any welded repairs.
- ♦ Power Steering; any component is inoperative. Any loose, broken or missing parts. Belts frayed, cracked or slipping.
- ♦ Any fluid leaks, fluid reservoir not full.

15. Brakes (393.40-393.55)

- ♦ Brake system has any deficiencies as described in FMCSA.
- ♦ Brake system has any missing, loose, broken, out of adjustment or worn out components.
- ♦ Brake system failure warning device missing, inoperative, or fails to give adequate warning.
- ♦ Brake system has any air or fluid leaks.

18. Suspension Systems (393.207)

- ♦ Any axle positioning part is cracked, broken, loose or missing. All axles must be in proper alignment.
- ♦ Any leaf spring cracked, broken, missing or shifted out of position.
- ♦ Adjustable axle assemblies with locking pins missing or not engaged.

20. Exhaust (393.83)

- ♦ Any part of the exhaust system so located as would be likely to result in charring, burning, or damaging the wiring, fuel supply or any combustible part of the vehicle.
- ♦ Bus exhaust leaks or discharge forward of the rearmost part of the bus in excess of 6" for Gasoline powered or 15" for other than Gasoline powered, or forward of any door or window designed to be opened on other than a Gasoline powered bus. (Exception: emergency exit).
- ♦ Any leak at any point forward of or directly below the driver and/or sleeper compartment.

21. Frame (393.201)

- ♦ Any cracked, broken, loose or sagging frame member.
- ♦ Any loose or missing fasteners including those attaching engine, transmission, steering gear, suspension, body, and fifth wheel.
- ♦ Any condition that causes the body or frame to contact the tire or wheel assemblies.

22. Tires and Wheels (393.75, 393.205)

- ♦ Any body ply or belt material exposed through tread or sidewall.
- ♦ Any tread or sidewall separation.
- ♦ Any cut exposing ply or belt material.
- ♦ Tread depths less than 4/32" on steering axle.
- ♦ Less than 2/32" on any other axle.
- ♦ Any bus with regrooved, recapped, or retreaded tires on the front wheels.
- ♦ Any tire not properly inflated or any overloaded tire.
- ♦ Any tire that comes in contact with any part of the vehicle.
- ♦ Any tire marked "Not for Highway Use".
- ♦ Wheels or rims shall not be cracked or broken.
- ♦ Stud or bolt holes on the wheels shall not be elongated.
- ♦ Nuts or bolts shall not be missing or loose.

24. Emergency Equipment (393.95)

- ♦ Every power unit must be equipped with a fire extinguisher that is properly filled and readily accessible for use.
- ♦ Spare fuses or other overload protective device.
- ♦ Warning devices for stopped vehicles.

25. License (383.23, 391.41)

- ♦ No person shall operate a commercial motor vehicle unless such person has passed written and driving tests which meet the Federal Standards for the commercial motor vehicle that person operates.
- ♦ Persons shall not drive a commercial motor vehicle unless he/she is physically qualified to do so and has on his/her person the original, or a photographic copy, of a medical examiner's certificate that he/she is physically qualified.

IN ADDITION TO THE ABOVE:

Agency personnel reserve the right to reject any equipment due to any additional condition or combination of conditions that make the vehicle unsafe, unreliable, or may pose unreasonable damage to the environment, or will be unable to fully perform the duties for which the equipment has been hired.

The inspector shall inspect for compliance with the FMCSA, State and Local laws and regulations. Therefore, the Inspector must ACCEPT or REJECT all equipment he/she inspects.

EXHIBIT M – FORMS AND CHECKLISTS
Miscellaneous Heavy Equipment
Vendor Equipment Certification Form

Equipment Type:

Please check the appropriate item listed below that identifies the manufacturer’s original intended use of the equipment being offered. If multiple pieces of the same type of equipment are offered under this solicitation, complete a separate Vendor Equipment Certification Form for each item.

- Excavator**
- Purpose Built Strip Mulcher/Masticator**
- Purpose Built Boom Mounted Mulcher/Masticator**
- Skidder**
- Other _____ (describe machine type)**

Equipment Make: _____ **Model:** _____

VIN#: _____ **EQUIPMENT/Unit I.D.** _____

I certify that the equipment listed above conforms to all original manufacturers design and safety standards, and meets all Federal, State and local OSHA rules and regulations required for the intended use of the equipment identified in the solicitation *Statement of Work*. The above equipment has all required original manufacturer installed screens and guarding (including ROPS, FOPS and OPS) to safely work in a logging/forest environment. The above equipment also has all additional manufacturer recommended safety equipment installed for the purpose in which the equipment is to be utilized under this agreement. In the event that the machines ROPS/FOPS or OPS has been altered or modified after the machine was delivered from the manufacturer, it is my responsibility to ensure that the integrity of the ROPS/FOPS or OPS has not been compromised and still meets all Federal, State and local OSHA Rules and Regulations. The requirements identified on this signed certification form does not relieve me of any other requirements identified in the equipment solicitation for which I am responding. The Government reserves the right to inspect and verify that the equipment meets all of the above requirements, and/or any additional required Federal, State and local rules and regulations at any time during the effective period of this agreement; however, it is the responsibility of the owner to ensure the equipment meets all safety and/or agreement requirements. In the event the above equipment becomes non-compliant with any of the OSHA Federal, State or local requirements after the agreement is awarded, I will notify the Government official in charge and either correct the deficiency or remove the equipment from service until the deficiency is corrected.

Contractor Name: _____ **Representative Name:** _____

Contractor Signature: _____ **Date:** _____