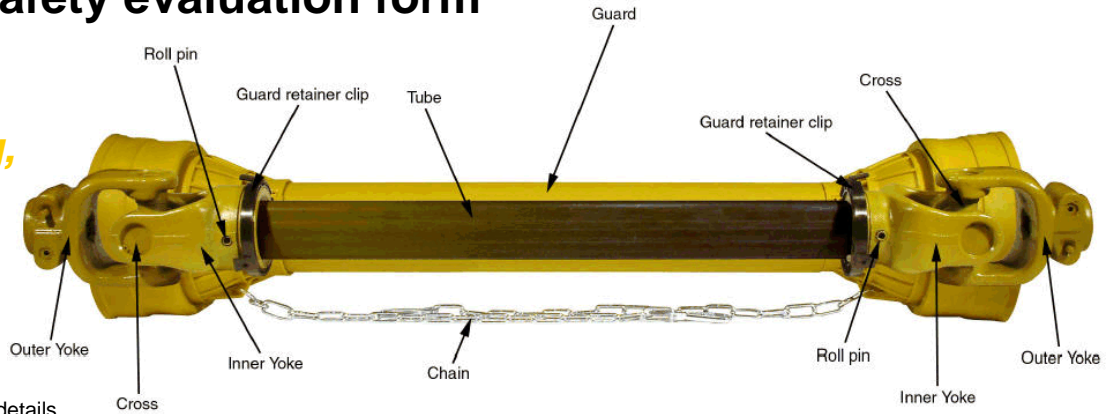


PTO shaft safety evaluation form

**Stay Safe,
Stay Legal,
Stay Working,**



Section A - Customer details

Name:		Account No:	
Phone:	Fax:	Address:	
Mobile:		Address:	
E-mail:		Postcode:	Date:
Notes:			

Section B - Product & Evaluation

Machine type:	Brand:	Condition: <i>good – fair – poor</i>		
General comments:				
Description	✓ as appropriate			Comments
Section of the shaft	Good	Fair	Poor	
1. Shaft condition				
2. Guard condition				
3. Chain fixing				
4. Yokes				
5. UJ				
6. Release pin				
7. Tube				

Machine type:	Brand:	Condition: <i>good – fair – poor</i>		
General comments:				
Description	✓ as appropriate			Comments
Section of the shaft	Good	Fair	Poor	
1. Shaft condition				
2. Guard condition				
3. Chain fixing				
4. Yokes				
5. UJ				
6. Release pin				
7. Tube				

Machine type:	Brand:	Condition: <i>good – fair – poor</i>		
General comments:				
Description	✓ as appropriate			Comments
Section of the shaft	Good	Fair	Poor	
1. Shaft condition				
2. Guard condition				
3. Chain fixing				
4. Yokes				
5. UJ				
6. Release pin				
7. Tube				

Machine type:	Brand:	Condition: <i>good – fair – poor</i>		
General comments:				
Description	✓ as appropriate			Comments
Section of the shaft	Good	Fair	Poor	
1. Shaft condition				
2. Guard condition				
3. Chain fixing				
4. Yokes				
5. UJ				
6. Release pin				
7. Tube				

Section C - Product & Evaluation

Date:	Company:	Address:
Checked by (print):		Checked by (sign):