



**DATE :**                      **OPERATOR / CHECKED BY: AMRIK SINGH**

**VENUE :**

	CHECK	YES	NO	ACTION
1	SAFETY VIDEO SENT AND GUIDELINES EXPLAINED			
2	INDEMNITY FORM SIGNED			
3	SAFETY THERMAL CUT OUT PLUGS INSTALLED			
4	ANY TRIP HAZARDS ON OUR WIRING COVERED			
5	EQUIPMENT SECURED AND ANCHORS INSTALLED			
6	CRASH MATS IN FRONT POSITION			
7	IS THE EXT LEAD PLUG IN GOOD CONDITION			
8	CONDITION OF INFLATABLE EQUIPMENT CHECKED			
9	BALANCE PAID			
10				
11				