

# Wholesale InterNational

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Make/Model:		
Serial Number:	Fork Length:	
Year:	# of Shifts Used:	Hours:

## ● Mast Information:

Lowered Height from Ground to Top of Mast with Forks on Floor:	"	
Maximum Fork Height when Mast is fully raised:	"	
Number of Stages:	Any Cylinder Leaks?	Any Cylinder Scores?

## ● Circle the Type of Power:

Gas	LPG	Diesel	If Electric forklift what Volt?:	12V	24V	36V	48V	
Is Unit Operating?	Engine Smoke:			None	Light	Heavy		
If Electric, Does Unit Come with:	Battery?	Yes or No;	Charger?	Yes or No				

## ● Transmission:

Type (Std. or Auto):	# of Speeds:		
Directional Control:	Lever Shift?	Pedal Shift?	
Condition: Any Slipping? or Leaks?			

## ● Other Information:

Attachment Make/Model:	Type:		
Opening Dimension:	", Closed Dimension:		"
Tire Condition:	% Tread Remaining, Single or Dual Drive?		
If Pneumatic, Are Tires Solid or Air Type?			
Comments or Missing Parts:			
Sheet Metal: Complete & Straight, or Dented?			

## ● Circle if unit is equipped with any of the following:

OverHead Guard?	Load Backrest?	Cab?	Side Shifter?	Power Steering?
Overall Condition: GOOD FAIR POOR NOT RUNNING				

Completed By:	Company Name:		
Phone Number:	Truck Location:		
Where was the forklift used in the plant?			