

Tractor (L / Grand L Series) – Product Delivery Inspection Receipt

Tractor Model: _____ Serial Number: _____

ROPS/CAB S/N: _____ Engine Serial Number: _____

DEALER INSPECTION
 Mark with "N/A" when Not Applicable

<p>1. General Condition</p> <p><input type="checkbox"/> Machine is clean, free of scratches/dents</p> <p><input type="checkbox"/> Safety/Operational decals in place/legible/good condition</p> <p><input type="checkbox"/> All guards in place</p> <p><input type="checkbox"/> Equipped with 'Slow Moving' sign</p> <p><input type="checkbox"/> Seat belt, toolbox (if equipped)</p> <p><input type="checkbox"/> Tire Pressure (LF _____ RF _____ LR _____ RR _____)</p> <p><input type="checkbox"/> ROPS/Cab, roof, windshield, wiper assembly (if equipped)</p> <p><input type="checkbox"/> Check all grease/lube points for proper lubrication</p> <p><input type="checkbox"/> Wheel mounting bolts, nuts properly torqued</p> <p><input type="checkbox"/> Check for applicable Campaigns</p> <p>2. Fluids and Engine Accessory Checks (These checks must be conducted prior to starting the engine)</p> <p><input type="checkbox"/> Engine oil level and Fuel level within acceptable range</p> <p><input type="checkbox"/> Coolant/Anti-freeze level (Record degrees: _____)</p> <p><input type="checkbox"/> Transmission/hydraulic oil level within acceptable range</p> <p><input type="checkbox"/> All filters installed and properly tightened</p> <p><input type="checkbox"/> All drain plugs properly torqued</p> <p><input type="checkbox"/> Battery cables tight and battery fully charged</p> <p><input type="checkbox"/> Front Axle fluid (4WD – if applicable)</p> <p><input type="checkbox"/> Radiator net/screen (if equipped)</p> <p><input type="checkbox"/> Alternator, fan, A/C belt tension (if equipped)</p> <p>3. Engine and Startup Checks</p> <p><input type="checkbox"/> Glow plug operation (if applicable)</p> <p><input type="checkbox"/> Start safety switches</p> <p><input type="checkbox"/> Engine starting,</p> <p><input type="checkbox"/> Engine RPM (Record: Idle _____ High _____)</p> <p><input type="checkbox"/> Parking brake operation</p> <p><input type="checkbox"/> All operator compartment controls</p> <p><input type="checkbox"/> HST pedal operation and adjustment (if applicable)</p> <p><input type="checkbox"/> Accelerator pedal operation and adjustment (if applicable)</p>	<p>4. Gauges, Indicators, Lights</p> <p><input type="checkbox"/> Engine oil pressure gauge/indicator</p> <p><input type="checkbox"/> Coolant temperature gauge/indicator</p> <p><input type="checkbox"/> Hour meter (Record hours: _____)</p> <p><input type="checkbox"/> Tachometer</p> <p><input type="checkbox"/> Battery/charging light</p> <p><input type="checkbox"/> Fuel level gauge/indicator</p> <p><input type="checkbox"/> Air cleaner light (if equipped)</p> <p><input type="checkbox"/> Horn operation</p> <p><input type="checkbox"/> Back-up alarm operation (if equipped)</p> <p><input type="checkbox"/> All lights</p> <p><input type="checkbox"/> Meter panel lamps and operation (if equipped)</p> <p>5. Operation</p> <p><input type="checkbox"/> Clutch and brake operation and free play</p> <p><input type="checkbox"/> PTO operation and performance (if applicable)</p> <p><input type="checkbox"/> All hydraulic functions and operations</p> <p><input type="checkbox"/> Free of oil , water, fuel leaks</p> <p><input type="checkbox"/> Check Transmission modes and programming (if applicable)</p> <p><input type="checkbox"/> HST/GST/DT operation and performance</p> <p><input type="checkbox"/> Transmission (all speeds)</p> <p><input type="checkbox"/> Power steering/steering operation</p> <p><input type="checkbox"/> 4WD Operation (if equipped)</p> <p><input type="checkbox"/> A/C, heating operation (if equipped)</p> <p><input type="checkbox"/> 3-point hitch mounting, hardware and operation</p> <p><input type="checkbox"/> All Safety Switch adjustment and operation</p> <p>6. Attachments and Special Features</p> <p><input type="checkbox"/> All attachments properly secured/tightened/operated</p>
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DEALER-OWNER ORIENTATION

I have reviewed the following items with the customer and have answered all questions regarding same:

Kubota Owner's Warranty Information Guide and have received signed Receipt Card.

Owner's manual, operation, safety, and maintenance sections of manual given to customer.

Location, operation, and importance of all operator presence and safety switches.

Instructed Customer on Proper Ballast (Counter Weight).

That Non-Kubota Loaders and Backhoes are not approved nor tested by Kubota (see owner's manual).

HST Plus transmission demonstration (if equipped).

Discussed Extended Warranty and KTAC Insurance options.

Dealer Signature: _____ Date: _____

CUSTOMER ACCEPTANCE

<p>I have received the following:</p> <p><input type="checkbox"/> Equipment orientation</p> <p><input type="checkbox"/> Copy of Product Delivery Inspection Receipt</p> <p><input type="checkbox"/> Operator's manual</p> <p><input type="checkbox"/> Kubota Owner's Warranty Information Guide/ Receipt Card</p>	<p>These items have been reviewed with me:</p> <p><input type="checkbox"/> Safe / Cold weather operation of equipment</p> <p><input type="checkbox"/> Proper maintenance</p> <p><input type="checkbox"/> Storage of equipment/attachments/implements</p> <p><input type="checkbox"/> Proper removal and installation of attachments/implements</p> <p><input type="checkbox"/> Options to purchase Extended Warranty and KTAC Insurance</p>
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Customer Signature: _____ Date: _____

NOTE: This document must be retained in Dealership Files for Future Reference.