

Safety and Health Inspection Checklist (Sample)

1. Use this checklist while looking for any unsafe practices and potential or near-miss incidents.
2. After the inspection is completed, report any problems to the safety and health committee.
3. Keep the signed checklist on file for one year plus the current year.

Department and location	Date of inspection
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Mark the box next to each item to indicate whether the item is satisfactory (S), unsatisfactory (U), or not applicable (NA). Describe any required action in the "Comments or follow-up" section below.

S	U	NA	Key Elements to Check	S	U	NA	Key Elements to Check
Machinery <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Point-of-operation guards are in place <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Proper lockout/tagout procedure is implemented <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Regular maintenance is performed				Personal protective equipment The following are available and properly maintained: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Goggles or face shields <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Safety shoes <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Hard hats <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Gloves <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Respirators <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Protective clothing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Safety glasses			
Pressure equipment <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Air safety valve and compressors are in good condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Gas cylinders are secured				Fire protection <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fire extinguishers are inspected monthly and serviced annually <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fire hoses, sprinklers, and systems are maintained <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Exits, stairs, and signs are visible and clear <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Flammable materials are stored properly			
Unsafe practices <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Excessive speed of vehicles <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Improper lifting <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Horseplay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Running in the aisles or on stairs <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Working under suspended loads <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Working on machines without lockout/tagout <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other _____				Materials handling equipment <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Ladders and scaffolds are in good condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Power trucks and hand trucks are maintained <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Cranes and hoists are in good condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Conveyors are guarded <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Cables, ropes, chains, and slings are in good condition			
First aid <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> First aid kits are available and stocked <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Emergency showers are available and inspected <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Eyewash stations are available and inspected <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Injuries and illnesses are reported promptly				Bulletin boards <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Job safety and health poster is provided <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Workers' compensation poster is provided <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Emergency information is posted <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Safety and health committee information is posted			
Other hazards <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Portable chemical containers are labeled <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Acids and caustics are stored properly <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Solvents are stored properly <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Dusts, vapors, or fumes are mitigated <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> New chemicals or processes are reviewed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Electrical cords are in good condition				Miscellaneous <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> General housekeeping is good <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Fall protection for elevated areas is adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Material is stored and piled safely <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Light and ventilation are adequate <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Noise is not excessive <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Electrical panels are not blocked			
Tools <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Power tools are in good condition (including wiring and grounding) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Hand tools and lawn and grounds care equipment are in good condition <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Tools are used and stored properly				Additional items (Print description below) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> _____			
Comments or follow-up (add pages if needed)							

Inspector's signature	Date
Supervisor's signature	Date