

GENERAL SAFETY INSPECTION CHECKLIST

INSPECTOR _____

DATE _____

Check the items you want to include in *your* checklist. Many of the following items will be appropriate for nearly any operation, though some of them will not be applicable across the board. It is recommended that the employer add unique items that need to be checked for their operations.

LEGEND: S = Satisfactory; U = Unsatisfactory

	S	U	Corrective Action/Date
Floors			
No slip, trip, or fall hazards	_____	_____	_____
Apertures or opening enclosed or covered	_____	_____	_____
Clean, orderly, and free of oil or grease hazards	_____	_____	_____
Grates over floor drains	_____	_____	_____
Non-slip surfaces wherever possible	_____	_____	_____
Any unsafe practices observed?			
Comment:			

Aisles			
Clearly marked	_____	_____	_____
Unobstructed	_____	_____	_____
Sufficiently wide for material handling	_____	_____	_____
Any unsafe practices observed?			
Comment:			

Stairs			
Uniform height and tread depth	_____	_____	_____
Grating-type tread on exterior stairs	_____	_____	_____
At least 22 inches wide	_____	_____	_____
Sturdy railings on all open sides	_____	_____	_____
No storage of material on stairs	_____	_____	_____
Proper lighting on stair areas	_____	_____	_____
No worn or damaged stair treads	_____	_____	_____
Any unsafe practices observed?			
Comment:			

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	S	U	Corrective Action/Date
Lighting			
Illumination level sufficient for work performed	_____	_____	_____
Emergency lighting adequate and operating	_____	_____	_____
Emergency lighting of all exit routes	_____	_____	_____
Any unsafe practices observed?			
Comment:			

Exits and Emergency Preparedness			
Adequate number of exits for emergency escape	_____	_____	_____
No locked or barred exits restricting escape	_____	_____	_____
Emergency exits adequately illuminated	_____	_____	_____
Exterior exit surfaces clear for prompt exit	_____	_____	_____
Flammable materials removed from exit areas	_____	_____	_____
Exterior exit doors open outward to flat surface	_____	_____	_____
Written and posted emergency evacuation plan with exit map for all areas	_____	_____	_____
Any unsafe practices observed?			
Comment:			

Employee Training			
New employee basic safety orientation	_____	_____	_____
New employee trained in safe work practices of their jobs	_____	_____	_____
Transferred employees trained in the safe work practices of their jobs	_____	_____	_____
Any unsafe practices observed?			
Comment:			

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	S	U	Corrective Action/Date
Fire Protection			
Written fire-training plan	_____	_____	_____
Fire equipment clearly marked	_____	_____	_____
Sprinkler heads have adequate clearance from stacked materials or equipment	_____	_____	_____
Master control valves for sprinklers locked open and easily accessible	_____	_____	_____
Regular fire drills held - date of most recent:	_____	_____	_____
Any unsafe practices observed?			
Comment:			
First Aid and Medical Services			
Adequate materials and equipment available	_____	_____	_____
Electrical safety items included in high-voltage areas	_____	_____	_____
Clear instructions on contacting outside medical resources	_____	_____	_____
Provisions for transportation to outside medical services	_____	_____	_____
OSHA 200 log book near first-aid station	_____	_____	_____
Two persons trained in posting of OSHA 200 log	_____	_____	_____
Trained first-aiders with recent recertification	_____	_____	_____
Any unsafe practices observed?			
Comment:			
Building Exterior			
No defective overhanging cornices, parapets gutters, or tiling	_____	_____	_____
No loose bricks on chimneys or stacks	_____	_____	_____
Any unsafe practices observed?			
Comment:			

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	S	U	Corrective Action/Date
Elevators			
Fire extinguisher available	_____	_____	_____
Safe load capacity of elevator marked	_____	_____	_____
Emergency exit provided	_____	_____	_____
Elevator inspected	_____	_____	_____
Any unsafe practices observed?			
Comment:			

Offices			
Floors have no slippery surfaces due to excessive polish or wax	_____	_____	_____
No holes or depressions in floors	_____	_____	_____
Rugs in hallways or offices are free from holes, tears	_____	_____	_____
Aisles free of obstructions, including electrical cords and outlets	_____	_____	_____
Stairwells and exits properly lighted	_____	_____	_____
No unsafe ladders or trolleys	_____	_____	_____
General house keeping is good	_____	_____	_____
No top-heavy filing cabinets (either by loading or drawer opening)	_____	_____	_____
Lifting, including opening of windows, is performed safely	_____	_____	_____
Correct use of pins, knives, scissors, or staplers	_____	_____	_____
Fire escape doors open and free for exit	_____	_____	_____
Glass doors either frosted or with lettering or decals	_____	_____	_____
Switch and cover plates in place	_____	_____	_____
No splinters in furniture or accessories	_____	_____	_____
No running or crowding or jamming revolving doors	_____	_____	_____
No fire hazards from cigarette butts	_____	_____	_____
Safe storage of flammables	_____	_____	_____
Persons trained in requirements of Hazard Communication Standard	_____	_____	_____
Correct type and placement of fire extinguishers	_____	_____	_____
First-aid facilities available	_____	_____	_____
Electric fans properly guarded	_____	_____	_____
Adequate ventilation	_____	_____	_____
Any unsafe practices observed?			
Comment:			