On-Site Safety Inspection Checklist 0206500_CP_11_07_en_A1.2



| DO#/Job Name: | Inspection Date: |
|---|------------------|
| Inspector: | Project Manager: |
| Bldg. Area: | Floor: |
| Superintendent: | Subcontractors: |
| General Safety Items checked: / = Meets Compliance; X = Not in Compliance; | |
| ITEMS INSPECTED | GENERAL COMMENTS |
| FALLS FROM OR INTO: | |
| Fall Protection: Leading edges protected. (Delineated or guarded.) | |
| Proper access. | |
| Walking / working surfaces | |
| Roof sides / edges protected | |
| Fall protection equipment/anchorage (guardrails / PFAS / PF restraint / Warning line / SRL / Engineered sys | s) |
| FP Competent Person / Worker fall protection training, documented | |
| Openings: Roof, floor, walls (Covered, Proper Identification, Guarded.) | |
| Scaffold: Access, guardrails, footing, planks, toe-boards, mud sills, daily inspection. | |
| Ladders: Secured and used properly, extended 36" above landing. | |
| Step ladders: Inspected, fully open, proper rating and use. | |
| Housekeeping and maintain passageways clear of egress obstructions. | |
| STRUCK BY: | |
| PPE (hard hat, safety glasses, and work boots or safety footwear, safety vest) | |
| Equipment Operation: Delineated routes, back-up alarms, qualified operators, | |
| equipment inspections, no loads conveyed over personnel. | |
| Powder actuated tools: trained/qualified operator | |
| CAUGHT IN /OR BETWEEN | |
| Excavations: Properly sloped/shored, mat'ls/equipment/spoils 2' from trench edges access/egress provided at 4' depth | |
| Confined Space: Permit, acceptable atmospheric condition, attendant, rescue plan. | |
| Pinch Points: Guarded or cordoned off. | |
| ELECTROCUTION: | |
| High voltage: Equipment clearance from overhead power lines, working clearances. | |
| Lock-out / Tag- out. | |
| Power tools: Inspected and in good condition. | |
| Temp. elect. service: GFCI, distribution syst., grounding, ext. cords, temp. lighting. | |
| Other Checkpoints: | |
| Concrete/Masonry Silica Exposure/Rebar Caps/Impalement | |
| Proper guards on machinery/equipment. | |
| Eye wash station (within expiration date) (adequate for hazardous products on site) | |
| LP gas cylinders stored/used properly (stored upright and secured from tipping) | |
| Hoses/welding leads in good condition. | |
| Fire extinguishers placed/inspected. | |
| Extinguisher @ flammables/equipment. | |
| | |
| First Aid kits fully stocked, current. | |
| Toilet w/hand washing facility provided. | |
| Permits obtained and posted. | |
| Competent person on site. | |
| SDS log: current/maintained/inventory list. | |
| Federal Safety & Health posters posted. | |
| Emergency Phone Numbers posted, directions to hospital posted. | |
| Work/storage areas posted/barricaded. | |
| Safety Documentation on site and reviewed by site personnel | |

Inspector Signature: