## Safety Committee Charter – Form 3: Safety Inspection Worksheet

Location:	Date:						
Inspectors:							
Office/Classroom Type Instructional Are	as:						
Description	Yes	No	N/A	Comments			
Access/Egress							
Aisles Clear							
Exits							
Marked, clear and unlocked							
Fire Extinguishers							
<ul> <li>Mounted, accessible, inspected</li> </ul>							
Automatic Emergency Defibrillator (AED)							
<ul> <li>Accessible</li> </ul>							
<b>Emergency Action Plan</b>							
<ul> <li>Evacuation Routes Posted</li> </ul>							
<ul> <li>Emergency Maps Posted</li> </ul>							
<ul> <li>Emergency Guides Posted in Rooms</li> </ul>							
Power cords							
<ul> <li>Good condition</li> </ul>							
<ul> <li>Placement/storage (not daisy chained)</li> </ul>							
Office Equipment							
Good condition							
Air Quality							
Temperature							
Air flow							
Lighting							
General							
Task							
Storage							
File Cabinets							
Heavy items low							
Other ISSUES noted:							

Description Access/Egress	
Aisles Clear     Exits	
Exits	
Marked, clear, unlocked	
Fire Extinguishers	
Mounted, accessible, inspected	
Automatic Emergency Defibrillator (AED)	
Accessible	
Emergency Action Plan	
Evacuation routes posted	
Emergency Maps posted	
Emergency Guides posted	
Eye Wash/Showers	
Functional, inspected weekly,     accessible	
Lighting	
Adequate for work areas	
Lockout/Tagout	
Written procedures, locks/tags	
PPE	
Available, correct types	
Appropriately worn when needed	
Ladders	
No loose, worn, damaged rungs or	
side rails	
Machine Guarding	
Not bent, broken or lost	
Housekeeping	
Aisles clear, no food/drink in shop	
Cranes and Slings/Hooks	
No damaged hoist chains, wire ropes,	
mechanical parts, rails, wheels	
No damage, cracks, deformations	
Hook latches present	
Welding	
Torches: Hoses, connections and	
valves good repair	
Electric Welding leads and equipment	
in good repair	
Compressed gases stored upright,	
chained	
Manifolds, pressure regulators, hoses,	
gauges, relief valves in good condition	
Proper ventilation	
Proper PPE	

Location:\_\_\_\_\_ Date:\_\_\_\_\_

Lab/Studio/Shop Type Areas (Continued):							
Description	Yes	No	N/A	Comments			
Compressed Air							
<ul> <li>Hoses, air nozzles, wands in good condition</li> </ul>							
<ul> <li>Proper use</li> </ul>							
Portable Tools							
<ul> <li>Machine guards, handles, cords in good repair</li> </ul>							
<ul> <li>Proper storage</li> </ul>							
Storage							
<ul> <li>Chemicals stored properly</li> </ul>							
<ul> <li>Tall/Heavy shelving secured</li> </ul>							
<ul> <li>Heavy items low</li> </ul>							
Other ISSUES noted:							

Location:\_\_\_\_\_ Date:\_\_\_\_\_