

# Workplace Safety Inspection Checklist

Workplace Name/Location

Date of Inspection

Inspector Name

## INSTRUCTIONS:

This checklist is designed to conduct a comprehensive safety inspection of the workplace to identify potential hazards and ensure compliance with safety regulations. Carefully review each item and mark the corresponding checkbox to indicate compliance or note any observations and areas for improvement. Use the "Notes/Observations" section to provide additional details, corrective actions, and any required follow-up.

## 1. GENERAL SAFETY

Housekeeping: Inspect for cleanliness and clutter-free work areas.

Yes  No  NA

Emergency Exits: Ensure emergency exits are accessible and unblocked.

Yes  No  NA

Safety Signage: Verify the presence and visibility of safety signs and warnings.

Yes  No  NA

Fire Extinguishers: Check fire extinguishers for accessibility and inspection tags.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## 2. ELECTRICAL SAFETY

Electrical Wiring: Inspect electrical wiring for damages or exposed wires.

Yes  No  NA

Electrical Panels: Ensure electrical panels are properly labeled and accessible.

Yes  No  NA

Ground Fault Circuit Interrupters (GFCIs): Check for the presence of GFCIs in wet areas.

Yes  No  NA

Extension Cords: Verify proper use and condition of extension cords.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## 3. ERGONOMICS

Workstations: Inspect workstations for ergonomic setup and adjustability.

Yes  No  NA

Chairs and Seating: Ensure chairs provide proper support and adjustability.

Yes  No  NA

Lighting: Check lighting levels to prevent eye strain and discomfort.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

#### 4. FIRE SAFETY

- Fire Alarms: Test fire alarms for proper functionality.  Yes  No  NA
- Fire Drills: Verify that fire drills are conducted regularly.  Yes  No  NA
- Flammable Materials: Check for proper storage and handling of flammable materials.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

#### 5. HAZARDOUS MATERIALS

- Material Storage: Inspect storage areas for proper handling of hazardous materials.  Yes  No  NA
- Material Safety Data Sheets (MSDS): Ensure MSDS are available for hazardous materials.  Yes  No  NA
- Spill Control: Inspect for the presence of spill kits and spill control measures.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

#### 6. PERSONAL PROTECTIVE EQUIPMENT (PPE):

- PPE Assessment: Check if workers are provided with appropriate PPE.  Yes  No  NA
- PPE Use: Ensure workers are using the required PPE for their tasks.  Yes  No  NA
- PPE Condition: Verify the condition and fit of PPE.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

#### 7. MACHINERY AND EQUIPMENT

- Machine Guards: Inspect machinery for proper guarding and safety features.  Yes  No  NA
- Lockout/Tagout: Verify compliance with lockout/tagout procedures during maintenance.  Yes  No  NA
- Equipment Inspection: Check for proper maintenance and condition of equipment.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

#### 8. WALKING SURFACES

- Slip and Trip Hazards: Inspect for potential slip and trip hazards.  Yes  No  NA
- Floor Mats: Check for proper floor mat installation and secure them in place.  Yes  No  NA
- Stairs and Handrails: Ensure stairs and handrails are in good condition.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## 9. FIRST AID AND EMERGENCY PREPAREDNESS

First Aid Kits: Verify the presence and completeness of first aid kits.

Yes  No  NA

First Aid Training: Check if workers are trained in first aid and emergency procedures.

Yes  No  NA

Emergency Contacts: Ensure emergency contact information is posted and up-to-date.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ADDITIONAL NOTES / OBSERVATIONS

[Insert any additional notes or workplace safety inspection observations made during the inspection]

## STATEMENT OF INSPECTION

I hereby certify that I have conducted the above workplace safety inspection and that the workplace has been thoroughly inspected for potential hazards and safety compliance. Any identified issues have been documented, and necessary corrective actions have been recommended.

Inspector's Name :

Signature :

Date :

## APPROVED BY

Name :

Signature :

Date :