

# Daily Safety Inspection

Facility Name / Location

Date of Inspection

Inspector's Name

## INSTRUCTIONS:

This checklist is designed to help you conduct daily safety inspections in your facility. Carefully review each item and mark the corresponding checkbox to indicate compliance or note any observations and areas that require attention. Use the "Notes/Observations" section to provide additional details, necessary improvements, and any required follow-up.

## GENERAL SAFETY

Emergency Exits: Check that emergency exits are unobstructed and clearly marked.

Yes  No  NA

Fire Extinguishers: Verify that fire extinguishers are accessible and in good condition.

Yes  No  NA

Evacuation Routes: Ensure that evacuation routes are clearly posted and well-lit.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## HOUSEKEEPING

Clutter: Check for clutter or obstructions in walkways and work areas.

Yes  No  NA

Spills: Verify that spills are promptly cleaned to prevent slips and falls.

Yes  No  NA

Trash Disposal: Ensure that trash is properly contained and disposed of.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## PERSONAL PROTECTIVE EQUIPMENT (PPE)

PPE Availability: Check that required PPE (e.g., helmets, goggles) is available.

Yes  No  NA

PPE Use: Verify that employees are wearing the appropriate PPE for their tasks.

Yes  No  NA

PPE Condition: Ensure that PPE is in good condition and properly maintained.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## MACHINERY AND EQUIPMENT

Lockout/Tagout: Check that machinery and equipment have proper lockout/tagout procedures in place.  Yes  No  NA

Guards and Shields: Verify that guards and shields are in place and functional.  Yes  No  NA

Equipment Maintenance: Ensure that machinery and equipment are well-maintained.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL SAFETY

Electrical Cords: Check for frayed or damaged electrical cords.  Yes  No  NA

Outlets: Verify that outlets are not overloaded and are in good condition.  Yes  No  NA

Electrical Panels: Ensure that electrical panels are accessible and properly labeled.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## HAZARDOUS MATERIALS

Chemical Storage: Check that hazardous materials are properly labeled and stored.  Yes  No  NA

Material Safety Data Sheets (MSDS): Verify that MSDSs are readily accessible.  Yes  No  NA

Spill Kits: Ensure that spill kits are available and employees know how to use them.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## FIRST AID AND MEDICAL SUPPLIES

First Aid Kits: Check that first aid kits are fully stocked and accessible.  Yes  No  NA

Eye Wash Stations: Verify that eye wash stations are functional and accessible.  Yes  No  NA

Medical Contacts: Ensure that emergency medical contact information is posted.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## TRAINING AND COMMUNICATION

Safety Training: Check that employees have received required safety training.

Yes  No  NA

Safety Posters: Verify that safety posters and notices are displayed.

Yes  No  NA

Safety Meetings: Ensure that regular safety meetings are held.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ADDITIONAL NOTES / OBSERVATIONS

[Insert any additional notes or Daily Safety Inspection checklist observations made during the inspection]

## STATEMENT OF INSPECTION

I hereby certify that I have conducted the above Daily Safety Inspection checklist and that the facility has been assessed for compliance with daily safety measures. Any identified issues have been documented, and necessary improvements have been recommended.

Inspector's Name :

Signature :

Date :

## APPROVED BY

Name :

Signature :

Date :