Machine Safety Inspection Checklist

Machine Name / ID						
Date of Inspection		Inspector Name				
	assess the safety of machines in the work iny observations and areas for improveme ow-up.					ssary
Guards in Place: Check that	all required machine guards are in	place during operation.		Yes	No	NA
Guards Securely Attached: Ve	rify that guards are securely fastened a	and cannot be easily remove	ed.	Yes	No	NA
Interlock Systems: Check if i	interlock systems are working correc	ctly with the guards.		Yes	No	NA
Observations / Notes / Corrective actions, if any:						

EMERGENCY STOP BUTTONS

Emergency Stops Functionality: Test the emergency stop buttons for quick and proper activation.	Yes	No	NA
Location and Visibility: Ensure that emergency stop buttons are easily accessible and clearly labeled.	Yes	No	NA
Functionality Test: Verify that the emergency stop stops the machine as expected.	Yes	No	NA
Observations / Notes / Corrective actions, if any:			

CONTROL PANELS AND LABELS

Control Panel Labels: Check that control panels are properly labeled with clear instructions.	Yes	No	NA
Control Panel Accessibility: Ensure that control panels are easily accessible to authorized personnel only.	Yes	No	NA
Safety Labels: Verify that safety labels and warnings are present as required.	Yes	No	NA
Observations / Notes /			

Corrective actions, if any:

POWER SOURCES

Power Supply: Check if machines are properly connected to the power supply.	Yes	No	NA
Power Cords and Wiring: Inspect power cords and wiring for damage or wear.	Yes	No	NA
Overcurrent Protection: Verify that overcurrent protection devices are in place and functional.	Yes	No	NA
Observations / Notes / Corrective actions, if any:			

MACHINE OPERATION

Safety Devices Functionality: Test any safety devices, sensors, or light curtains for proper operation	on. Yes	No	NA
Sequence of Operation: Ensure that the machine operates as intended in a safe sequence.	Yes	No	NA
Limit Switches: Check if limit switches are working correctly to prevent overtravel.	Yes	No	NA
Observations / Notes / Corrective actions, if any:			

MAINTENANCE AND LUBRICATION

Maintenance Schedule: Verify that machines are on a regular maintenance schedule.	Yes	No	NA
Lubrication: Check that machines are properly lubricated as required.	Yes	No	NA
Maintenance Records: Ensure that maintenance records are available and up to date.	Yes	No	NA
Observations / Notes / Corrective actions, if any:			

TRAINING AND QUALIFICATIONS

Operator Training: Review operator training records to ensure proper machine operation.	Yes	No	NA
Authorized Personnel: Ensure that only authorized personnel operate and maintain the machines.	Yes	No	NA
Certification: Verify that qualified personnel conduct maintenance and repairs.	Yes	No	NA
Observations / Notes /			

Corrective actions, if any:

Leveling: Check if machines	are properly leveled and stable during operation.	Yes	No	NA
Secure Mounting: Verify that	machines are securely mounted to prevent vibrations or movement.	Yes	No	NA
Anti-Tip Devices: Ensure that	t machines with a risk of tipping have proper anti-tip devices.	Yes	No	NA
Observations / Notes / Corrective actions, if any:				

ADDITIONAL NOTES/OBSERVATIONS

MACHINE STABILITY

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

STATEMENT OF INSPECTION

I hereby certify that I have conducted the above Machine Safety Inspection checklist and that the machines have been assessed for 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	:		

