

# OSHA Electrical Safety Inspection

Workplace Name/Location

Date of Inspection

Inspector's Name

## INSTRUCTIONS:

This checklist is designed to ensure compliance with OSHA's Electrical Safety Standards (29 CFR 1910.301-399) to prevent electrical hazards in the workplace. 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.

## GENERAL ELECTRICAL SAFETY

Electrical Panels: Verify that electrical panels are accessible and properly labeled.

Yes  No  NA

Working Clearances: Ensure there are adequate working clearances around electrical equipment.

Yes  No  NA

Lockout/Tagout: Check if lockout/tagout procedures are followed during maintenance.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL EQUIPMENT

Equipment Condition: Inspect electrical equipment for signs of damage or wear.

Yes  No  NA

Grounding: Verify that electrical equipment is properly grounded.

Yes  No  NA

Equipment Maintenance: Ensure that electrical equipment is properly maintained.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## EXTENSION CORDS AND TEMPORARY WIRING

Proper Use: Check if extension cords are used properly and not as a substitute for permanent wiring.

Yes  No  NA

Temporary Wiring: Verify that temporary wiring is used safely and for the intended duration.

Yes  No  NA

Overloading: Ensure that extension cords are not overloaded with excessive electrical loads.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL OUTLETS AND RECEPTACLES

Outlet Condition: Inspect electrical outlets for damages or loose connections.  Yes  No  NA

GFCIs: Verify the presence and proper functioning of Ground Fault Circuit Interrupters (GFCIs) in wet areas.  Yes  No  NA

Outlet Covers: Ensure that all unused outlets have appropriate covers.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL WIRING

Wiring Inspection: Inspect electrical wiring for damages or exposed wires.  Yes  No  NA

Wiring Routing: Check if wiring is properly routed and protected from potential damage.  Yes  No  NA

Overheating: Look for signs of overheating or burning around electrical wiring.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL PPE (PERSONAL PROTECTIVE EQUIPMENT)

PPE Assessment: Check if workers are provided with appropriate electrical PPE.  Yes  No  NA

PPE Use: Ensure workers use the required PPE when working on electrical systems.  Yes  No  NA

PPE Condition: Verify the condition and fit of electrical PPE.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ELECTRICAL SAFETY TRAINING

Training Records: Review training records to ensure employees have received proper electrical safety training.  Yes  No  NA

Electrical Hazards: Verify that employees understand electrical hazards and safety procedures.  Yes  No  NA

Qualified Personnel: Ensure that only qualified personnel perform electrical work.  Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## OVERCURRENT PROTECTION

Circuit Breakers and Fuses: Inspect circuit breakers and fuses for proper operation.

Yes  No  NA

Overcurrent Protection Devices: Verify that overcurrent protection devices are correctly sized.

Yes  No  NA

Circuit Overloading: Ensure that circuits are not overloaded beyond their rated capacity.

Yes  No  NA

Observations / Notes /  
Corrective actions, if any:

## ADDITIONAL NOTES / OBSERVATIONS

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

## STATEMENT OF INSPECTION

I hereby certify that I have conducted the above OSHA electrical safety checklist inspection and that the workplace is in compliance with OSHA's Electrical Safety Standards. Any identified issues have been documented, and necessary corrective actions have been recommended.

Inspector's Name :

Signature :

Date :

## APPROVED BY

Name :

Signature :

Date :