Risk Inspection Checklist

Facility Name / Location					
Date of Inspection		Inspector's Name			
checkbox to indicate complia	o help you assess and manage potential rince or note any observations and areas thatents, and any required follow-up.				
HAZARD IDENTIFICATION					
Identify Hazards: Check that hazards are identified in various work areas.				No	NA
Documented Hazards: Verify that hazards are documented and assessed for severity.			Yes	No	NA NA
Hazard Communication: Ensure that employees are informed about identified hazards.			Yes	No	NA NA
Observations / Notes / Corrective actions, if any:					
	zards are assessed for potential impac		Yes	No	NA NA
Risk Ranking: Verify that risks are ranked based on severity and probability.			Yes	No	NA NA
Observations / Notes / Corrective actions, if any:	neasures are in place to mitigate high-rish	Tidzaius.	Yes	No No	NA NA
EMERGENCY PREPAREDN	IESS				
Emergency Plans: Check that emergency plans are established and communicated.			Yes	No	NA NA
Evacuation Routes: Verify that evacuation routes are well-marked and accessible.		Yes	No	NA	
Emergency Contacts: Ensure that emergency contact information is readily available.		Yes	No	NA NA	
Observations / Notes / Corrective actions, if any:					

PERSONAL PROTECTIVE E	EQUIPMENT (PPE)			
PPE Assessment: Check if PPE requirements are identified for each hazard.			No	NA
PPE Availability: Verify that required PPE is available to employees.			No	NA
PPE Training: Ensure that employees are trained in proper PPE use.			No	NA
Observations / Notes / Corrective actions, if any:				
MACHINERY AND EQUIPM	ENT	Yes		
Equipment Hazards: Check that machinery and equipment hazards are identified.			No	NA NA
Safeguards: Verify that safeguards (guards, interlocks) are in place and functional.			No	NA
Lockout/Tagout: Ensure that lockout/tagout procedures are established.			No	NA
Corrective actions, if any:				
CHEMICAL AND HAZARDO	OUS MATERIALS			
Chemical Handling: Check th	at safe handling procedures are established for hazardous materials.	Yes	No	NA
Storage Practices: Verify tha	t hazardous materials are stored in compliance with regulations.	Yes	No	NA
Chemical Labels: Ensure tha	t chemical containers are properly labeled.	Yes	No	NA
Observations / Notes / Corrective actions, if any:				
ELECTRICAL SAFETY		Yes		
Wiring and Connections: Check for damaged or exposed wiring and connections.			No	NA NA
Electrical Panels: Verify that electrical panels are accessible and properly labeled.		Yes	No	NA NA
Grounding: Ensure that equipment and appliances are properly grounded.		Yes	No	NA NA
Observations / Notes / Corrective actions, if any:				

TRAINING AND EDUCAT	TION					
Employee Training: Check that employees are trained to recognize and respond to risks.				Yes	No	NA
Safety Procedures: Verify that employees are familiar with safety procedures. Training Records: Ensure that training records are maintained and up to date.				Yes	No	NA
				Yes No		NA
Observations / Notes / Corrective actions, if any:						
ADDITIONAL NOTES / O	BSERVATIONS es or Risk Inspection checklist obser	rvations made during the inspection]				
		klist and that the facility has been assesse	ed for pote	ntial risks	s. Any identifi	ed issues
Inspector's Name :		Signature :				
Date :						
APPROVED BY						
Name :		Signature :				
Date :						



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