

ARKANSAS TECH UNIVERSITY HEALTH & SAFETY POLICY

INSPECTION REPORT FORM

DATE: _____ AREA INSPECTED: _____

INSPECTOR(S): _____

NO	AREA OR ITEM INSPECTED	OK	NA	NEEDS ATTENTION
1.	First Aid Supplies: Are supplies readily available, is the cabinet clean and well stocked and supplies current?			
2.	Fire Extinguisher: Is a fire extinguisher available in the work area and has it been properly inspected and in proper operating condition?			
3.	Housekeeping: Is the work area clean, and orderly, free of debris, trash containers emptied as needed?			
	Are combustible, flammable materials properly stored?			
4.	Aisles: Are aisles, passageways and walkways clear, dry, and free of tripping hazards?			
5.	Storage: Are materials, products or supplies properly and safely stored to prevent tipping over or falling?			
	Are compressed gas cylinders properly stored and secured?			
	Are containers properly labeled as to contents?			
6.	Ladders: Are proper ladders available for use when needed?			
	Are ladders in good condition with all appropriate labels and warnings in place?			
7.	Machines & Equipment: Are machines and equipment in safe operating condition?			
	Are all necessary guards in place and used?			
	Is mobile equipment properly inspected?			
8.	Hand Tools: Are the right tools being used for the job?			
	Are tools in good condition – no broken handles, no broken points or blades, etc.?			
9.	Electrical: Are cords in good shape – ground prong in place, no cuts or broken insulation and insulation intact with plug?			
	Are electrical tools and cords plugged into a ground fault circuit interrupter?			

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10.	Lighting: Is the lighting adequate for the work being done in the area?			
11.	Personal Protective Equipment: Is proper PPE available in the work area for the tasks involved – glasses, gloves, face shield, etc.? Is it being properly maintained and used by employees?			
12.	Access & Egress: Are entrances and exits kept dry or provided with non-skid mats, free of clutter, and properly marked?			
13.	Exterior: Are the areas outside the shop clean and free of debris and trash?			
14.	Office Area: Is the office neat, clean, orderly?			
15.	Signs: If safety posters and/or signs are used are they appropriate and current?			
16.	Ventilation: Is the ventilation adequate for the work being performed in the area (smell of gas, fumes, stale air, etc.)?			

REMARKS: Positive or Negative
