

WORKSHOP INSPECTION CHECKLIST

The answer to all these questions should be 'yes' or N/A. If 'no' you should note the location and brief details and investigate problem further to identify actions.

Areas inspected

Inspected by

Date

HAZARD

YES,
NO or
N/A

COMMENTS
(location & brief details)

RECOMMENDED CORRECTIVE
ACTION
(with person assigned)

TARGET

HAZARD	YES, NO or N/A	COMMENTS (location & brief details)	RECOMMENDED CORRECTIVE ACTION (with person assigned)	TARGET COMPLETION DATE	COMPLETED (date & signature)
Environment					
Is the room temperature comfortable during all seasons?					
Are windows in clean and safe condition?					

HAZARD

YES,
NO or
N/A

COMMENTS
(location & brief details)

RECOMMENDED CORRECTI
ACTION

HAZARD	YES, NO or N/A	COMMENTS (location & brief details)	RECOMMENDED CORRECTIVE ACTION (with person assigned)	TARGET COMPLETION DATE	COMPLETED (date & signature)
Stairs, Ladders and Platforms					
Are ladders safe and in good condition?					
Are stair handrails fastened to the wall securely?					
Are stairwells clear of materials and equipment?					
Are stairs and handrails in good condition?					
Are ladders and stairs provided with anti-slip treads?					
Hand & Power Tools					