

Workplace Inspection



Airswift Location:	Date:					Completed By:	
	Acceptable?		Hazard Priority		Risk	Health or Safety	
Inspection Items	Yes	No	Severity 1-3	Likelihood 1-3	Hazard Score	H/S	Description of Condition Requiring Attention
Housekeeping							
Counters, tables, work surfaces in good condition							
Floor clear of debris							
Flooring in good condition							
Garbage cans clean and empty							
Slip/trip hazards identified and corrected							
Materials not stored on floor in walkways or blocking exits							
Proper storage of tools and supplies							
Sinks clean, taps in good working order							
Washrooms clean							
Electrical							
Bulbs burnt out							
Extension cords used for temporary purposes only							
Electrical cords not damaged							
Emergency lighting operational							
Light switches working							
Electrical outlets in good repair							
Environment							
Adequate lighting in work area							
Stairs and handrails in good repair							
Fire Protection							

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Evacuation plans posted and clearly show external assembly area							
Exit signs displayed and illuminated with no burnt bulbs							
All Exits are clear - materials not blocking							
Fire Extinguisher monthly inspections signed off on tag							
Fire Extinguishers have been re-certified in the last 12 months							
Fire Extinguishers in place							
Fire Extinguishers free of obstruction							
Fire hoses easily accessible							
Fire pull boxes clear of obstruction							
Fire pull boxes signage clearly displayed							
Sprinkler heads 18" clear of obstruction							
First Aid							
Names of First Aiders displayed at each first aid kit							
First Aid kit properly stocked as per contents list							
Action Card forms available							
Signs							
First Aid signs clearly displayed							
Fire Extinguisher signs clearly displayed							
OHS Act Regulation and Code Manuals readily available							
Doors properly labeled							
Additional comments regarding inspection:							
Inspector Signature:			Sr. Management Signature:				

Inspection Items	Yes	No	Severity 1-3	Likelihood 1-3	Hazard Score	H/S	Description of Condition Requiring Attention
Hazards Identified	Priority		Completed by		Date Completed		Severity:
							How serious could the consequences be?
							3 – Can cause death/permanent disability.
							2 – It could send you to the hospital.
							1 – It could make you uncomfortable.
							Likelihood:
							How likely is it going to happen?
							3 – It is highly likely.
							2 – It might happen.
							1 – It is unlikely.
							Hazard Score = Severity x Likelihood