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Report details for the Event - Chelwell Estate ref

Chelwell Estate ref - Admin Template

19/12/2023

Site Safety Inspection Details

| Question | Answer |
|--------------|----------------------|
| First Name | John |
| Last Name | Black |
| Site | Chelwell Estate |
| GPS Location | 51°53'54"N 8°28'32"W |
| Date & Time | 19/12/2023 |

PPE

| Question | Answer |
|---|--------|
| Eye protection provided and being utilized * | Yes |
| Hearing protection provided * | Yes |
| Hard hats provided and being utilized * | Yes |
| Work boots worn by employees (steel toed where required) | Yes |



| Question | Answer |
|---|--------|
| Welding/cutting helmets, eye protection, gloves, bibs are available and worn when required * | Yes |
| Respirators/respirat ory protection program in place. (fit test records available) * | Yes |

Ladders/Stairways

| Question | Answer |
|---|--------|
| Ladders inspected for defects * | Yes |
| Ladders extend 3' above landing and secured * | Yes |
| Ladders pitched at 1' out from vertical for every 4' of height * | Yes |
| Ladders secured in place. * | Yes |
| Stairways equipped with stair rails and handrails * | Yes |
| Stairways free of debris, slip, trip and fall hazards * | Yes |



General Fall Protection

| Question | Answer |
|---|--------|
| Floor openings covered or guarded (cover secured) * | Yes |
| Workers exposed to falls 6' or more are protected * | Yes |

Scaffolds

| Question | Answer |
|--|--------|
| Competent person assigned to supervising erection/disassembl y * | Yes |
| Competent person assigned to conduct regular or pre-use inspections * | Yes |
| Working surfaces 10' or higher equipped with guardrails * | Yes |
| Competent person assigned to supervise operations at all times * | Yes |
| Working surfaces clear of debris, slip, trip and fall hazards * | Yes |



Excavations and Trenches

| Question | Answer |
|---|--------|
| Competent person assigned to supervise operations at all times * | Yes |
| All excavations and trenches 4' or deeper equipped with protective system * | N/A |
| <i>Ladders or other means of quick exit within 25' of each worker *</i> | Yes |
| Spoil pile at least 2' from edge of excavation or trench * | Yes |

Electrical

| Question | Answer |
|---|--------|
| GFCI or Assured Equipment Grounding Conductor Program in place * | N/A |
| All outlets checked for proper wiring and GFCI checked if applicable * | N/A |
| All tools and equipment inspected for defects in cords and plugs * | Yes |



| Question | Answer |
|---|--------|
| Extension cords are in good condition * | Yes |
| Sources of electricity such as panel boxes, overhead lines, etc. marked * | Yes |

Cylinders

| Question | Answer |
|---|--------|
| Oxygen and fuel cylinders properly separated and secure * | N/A |
| <i>Compressed gas cylinders labeled *</i> | N/A |
| Cylinders turned off and valve caps in place when not in use * | N/A |
| <i>Hoses and torches free from defects *</i> | Yes |

Fire Prevention

| Question | Answer |
|---|--------|
| Flammable/combus tible liquids stored away from ignition sources * | N/A |



| Question | Answer |
|---|--------|
| Portable containers of such liquids are approved and have self-closing lids * | N/A |
| Adequate number of properly charged fire extinguishers available * | Yes |
| Extinguishers properly located with current inspection tag * | Yes |
| Flammable/combus tible, debris/trash kept from welding and cutting operations * | Yes |
| Oily rags disposed of in approved self- closing waste containers * | Yes |

Tools and Equipment

| Question | Answer |
|---|--------|
| Tools and equipment in good condition * | Yes |
| Defective equipment tagged as such and removed from work area * | Yes |
| Tool and equipment guards in place and in good condition * | Yes |



Confined Space

| Question | Answer |
|---|--------|
| Air sampling equipment calibrated * | Yes |
| Air samples show acceptable oxygen concentration. (19.5% to 23.5%) * | Yes |
| Air samples show space is free of toxic/flammable/ explosive gasses * | Yes |
| Trained attendant assigned to keep constant contact with all workers inside space * | Yes |
| Trained person assigned to recheck air quality frequently throughout the project * | Yes |

Hazard Communication

| Question | Answer |
|--|--------|
| Written Hazard Communication Program in place * | Yes |
| Written program includes complete list of all chemicals * | Yes |



| Question | Answer |
|---|--------|
| SDS available for every chemical on list * | Yes |
| <i>Chemical containers properly labeled *</i> | Yes |

First Aid

| Question | Answer |
|--|--------|
| First aid kits readily accessible to all workers * | Yes |
| Contents of first aid kits approved by qualified health care provider * | Yes |
| First aid kits include rubber gloves, eye protection and CPR mask * | Yes |
| <i>Properly trained first aid provider on site *</i> | Yes |

Housekeeping

| Question | Answer |
|---|--------|
| Suitable containers available for disposal of trash and debris * | Yes |



| Question | Answer |
|---|--------|
| Walkways, aisles, hallways and passageways clear of trash, debris and materials * | Yes |
| Trash and debris containers empty * | Yes |
| Tools not in use stored in job boxes * | Yes |
| Equipment not is use stored properly * | Yes |
| <i>Pipe, conduit, ductwork and other materials stored neatly *</i> | Yes |

Other

| Question | Answer |
|--|--------|
| Potable water readily accessible to all workers * | Yes |
| Clean, private toilets accessible to all workers * | Yes |
| OSHA Job Site Poster posted * | Yes |
| <i>Emergency telephone numbers posted or made available to all workers *</i> | Yes |



Action Required

| Question | Answer |
|----------------------------------|---|
| <i>Comments & Images</i> | Comments: All good. All inspections, checklists and audits complete. Ready for start date. |
| Signature | Jehn Book |