



**Safety Inspection: Jobsite:** \_\_\_\_\_ **Job#/Van#** \_\_\_\_\_

Inspection by: \_\_\_\_\_ Date: \_\_\_\_\_ Jobsite Foreman: \_\_\_\_\_

***Note** – please take equipment tags with you, if you see something that should be tagged, do it right away. Have the foreman send the items back to the shop with their next delivery.*

**Record Keeping**

- yes no NEI Safety Policy available?
- yes no SDS poster visible and/or stickers on employee hard hats?
- yes no Records of weekly inspections/toolbox meetings available?
- yes no Tags to mark equipment requiring repair available?
- yes no Energized work permits available?

**Lifts on site** yes no (if no, skip to next section)

- yes no Are the batteries out of water?
- yes no Upon visual inspection, does the lift appear in working order?
- yes no Is there an OSHA inspected sticker on the lift?
- yes no Is the lift a type to require harnesses/lanyards or are we using it in a manner to require them?
- yes no If so, are harnesses/lanyards being used properly?

**Electrical Equipment (List defective tools on Page 2)**

- yes no Power tools in working order with good cords, etc?
- yes no If Wirepuller on site, are brushes good?

**Powder Actuated Tools (List defective tools on Page 2)**

- yes no Are all powder actuated tools being used on the jobsite?
- yes no Do any of the powder-actuated tools need repair?
- yes no Are the employees who use the powder-actuated tools certified?

**Extension Cords**

- yes no Are extension cords in good condition – no frayed ends, etc?
- yes no Are any cords tagged out of service?

**Temporary Power and Lighting at Site** yes no (if no, skip to next section)

- yes no Is the temporary service up to OSHA regulations? If not, corrections needed and when will be completed \_\_\_\_\_
- yes no Are Temporary light sockets securely hung?
- yes no Do all sockets have guards installed?
- yes no Is there a lamp in every socket?
- yes no Are all temporary GFCI receptacles in good working order?
- yes no Is there adequate lighting in all spaces or stand lighting available?



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**Personal protective equipment**

- yes no Are employees wearing hard hats (if needed)
- yes no Are employees wearing safety glasses (if needed)
- yes no Are employees wearing ear protection (if needed)
- yes no Are employees wearing OSHA class 2 safety vests (if needed)
- yes no Harness, lanyard & retractables - have they been inspected and have correct year's color tag?
- yes no GFCI pigtail
- yes no Is a lockout/tagout with picture kit available & complete?
- yes no Is there other personal protective equipment needed? \_\_\_\_\_
- yes no Is there an Arc Flash suit available?
- yes no Are the supplies in the first aid kit organized and adequate for project?

**Vehicles**

- yes no Are tires in good conditions?
- yes no Do brake lights work?
- yes no Do signal lights work?
- yes no Do head lights work?
- yes no Do tail lights work?
- yes no Is person having their regular maintenance done?
- yes no Is there anything that needs repair? \_\_\_\_\_
- yes no Is there a 5 lb fire extinguisher available and securely fastened to vehicle?  
Does it need inspection? yes no
- yes no Is there a reflective safety triangle available?
- yes no Is there a Lockout/tagout kit available?
- yes no Is an Arc Flash Suit available?
- yes no Are the supplies in the first aid kit organized and adequate ?
- yes no Is the vehicle organized and without unnecessary clutter?
- yes no Does the driver have an up-to-date DOT medical card?

**\*List defective tools below.**

Tool Description	Tool #



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**LADDER INSPECTION CHECKLIST**

*NR= Needs Repair*

LADDER #						
TYPE OF LADDER (check box)	<input type="checkbox"/> Extension	<input type="checkbox"/> Step	<input type="checkbox"/> Extension	<input type="checkbox"/> Step	<input type="checkbox"/> Extension	<input type="checkbox"/> Step
CONSTRUCTION OF LADDER (check box)	<input type="checkbox"/> Wood	<input type="checkbox"/> Metal	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Wood	<input type="checkbox"/> Metal	<input type="checkbox"/> Fiberglass
DATE (MM/DD/YY)						
INSPECTOR'S INITIALS						
REPAIR DATE / REPAIRER'S INITIALS						
TAGGED OUT OF SERVICE?	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> yes	<input type="checkbox"/> no
<b>GENERAL ITEMS INSPECTED</b>	<b>OK</b>	<b>NR</b>	<b>OK</b>	<b>NR</b>	<b>OK</b>	<b>NR</b>
Side rails in good condition						
Steps or rungs not loose or damaged						
Spreader braces not damaged and open fully						
Nails, screws, bolts not missing or damaged						
Ladder free from oil, grease, or slippery materials						
Manufacturer's labels, warnings, and ratings posted						
Movable parts operate freely						
Wooden parts free from splinters, cracks, decay						
Non slip feet not damaged and in good condition						
Ladder stored properly to prevent damage						
<b>STEP LADDERS</b>						
Stepladder is not wobbly and loose						
Paint shelf not damaged or missing						
Hinges not loose or damaged						
Ladder does not exceed 20 feet in height						
<b>EXTENSION LADDERS</b>						
Loose, broken, or missing extension locks						
Locks seat properly when ladder is extended						
Pulley, rung locks, and rope are in good condition						
Single section ladders do not exceed 30' in length						
Two-section ladders do not exceed 48' in length of metal ladders and 60' for wood ladders						

**Other**

yes no Are there other safety or OSHA violations evident?  
 List \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

yes no Have all items been discussed with jobsite foreman & other employees, as applicable?