MONTHLY SAFETY INSPECTION REPORT

Date of Inspection:		Persons Participating in Inspection:			
Company:					
POSSIBLE HAZARDS	RATE HAZARD	NOTES/COMMENTS:			
EXT	ERIOR / PARKIN	G LOT			
Are all parking areas well lit?					
Are parking areas free of snow, ice or other obstructions?					
Are curbs and other elevations painted / clearly marked to identify tripping hazard?					
Are all sidewalks and pavements clear of potholes,					
debris or other obstructions?					
Any other Concerns? (if yes, indicate in comment column)					
	ENTRANCE WAY	rs			
Is the front entrance well lit?					
Are all door closure devices working properly?					
Are all doors free of sharp objects?					
Are all threshold plates on all doors secure? No protruding screws?					
Are solid glass door marked to alert customers?					
Any other Concerns? (if yes, indicate in comment column)					
OFFICE AREAS					
Housekeeping acceptable?					
Aisle ways, Emergency Exits clear?					
Have all fire extinguishers been inspected within the last year? Is the tag initialed and dated?					
Is emergency lighting inspected?					
Is the employee lunchroom area acceptable?					

POSSIBLE HAZARDS	RATE HAZARD	NOTES/COMMENTS:					
OFFICE AREAS (CONT'D)							
Electrical – are all cords and wires in good condition							
and out of the way? Are supplies and other material stored in or on							
shelves or file cabinets properly to avoid overloading and/or tipping?							
Are supplies and other material stored in or on shelves or file cabinets properly to avoid overloading							
and/or tipping?							
Any other Concerns? (if yes, indicate in comment column)							
Housekeeping acceptable?							
Aisle ways, Emergency Exits clear?							
Have all fire extinguishers been inspected within the last year? Is the tag initialed and dated?							
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SERV	/ICE RECEPTION	AREA					
Are all automatic door closure devices working properly?							
Is the electrical panel closed properly and locked?							
Are housekeeping standards being met?							
Any other Concerns? (if yes, indicate in comment column)							
Is emergency lighting functional?							
Is shelving in good repair and are materials properly stored on them?							
Are all computer workstations operating properly and adjusted to user?							
Is the heating and ventilation system operating properly?							
Other concerns?							

POSSIBLE HAZARDS	RATE HAZARD	NOTES/COMMENTS:					
PERSONAL PROTECTIVE EQUIPMENT							
Is there an adequate inventory of PPE available in							
the workplace. Are employees using required personal protective							
equipment?							
Any other Concerns? (if yes, indicate in comment column)							
Si	ERVICE SHOP AF	REA					
Are all employees complying with the WHMIS regulations? (i.e. workplace labels, MSDS, etc.)							
Are all lights and emergency lights working properly?							
Is there proper signage posted near all hazardous equipment?							
Are all automotive lifts and hoists inspected and operational?							
Are lockout procedures being observed?							
Are all jack stands operational and in good repair?							
Are all gas cylinders properly chained, caged, and are oxygen and acetylene tanks stored properly and separately?							
Is the general ventilation system adequately providing clean air and removing airborne toxins?							

POSSIBLE HAZARDS	RATE HAZARD	NOTES/COMMENTS:				
SERVICE SHOP AREA						
Is the gas/fuel transfer equipment in good repair?						
Has the drive clean machine and area been inspected and clear of hazards?						
Are all employees wearing all prescribed Personal Protective Equipment? (i.e. safety shoes/boots, glasses, gloves, etc.)						
Is floor area clear of items that could cause slips, trips or falls?						
Are all supplies and materials stored properly?						
Is the bench grinder and guards in good repair?						
Have oil reservoir tanks been inspected for leaks and are in good condition?						
Is the wheel balancing machine in good repair and functional?						
Is the tire changing machine in good repair and functional?						
Is the strut spring compressor in good repair and functional?						
Is all the pneumatic equipment in good repair and functional? (i.e. air hoses, etc.)						
Has all welding equipment been inspected to identify leaks and ensure it is all in good repair? (i.e. torches, hoses, tacks, etc.)						
Are all electrical panels closed and locked? Are all materials stored away from all panels?						
EMERGENCY AND FIRE						
Is there an emergency phone numbers list next to the phone(s)?						
Are Emergency numbers current and easy to read?						
Are all Emergency exits clearly identified?						
Are all exit doors completely free of debris and/or other obstructions?						
Have all fire extinguishers been inspected within the last year? Is the tag initialed and dated?						
Is there a criteria list that identifies what is being checked on all fire extinguishers each month?						

Are all electrical cords and wires in good condition, secured and out of the way?	DATE	
POSSIBLE HAZARDS	RATE HAZARD	NOTES/COMMENTS:
Are all employees aware of their responsibilities with respect to our Fire Emergency Plan, as they relate to customers and visitors?		
Are all employees trained in the company's Emergency Evacuation Procedure?		
Any other Concerns? (if yes, indicate in comment column)		
	PARTS COUNTE	R .
Are all floor areas behind the counter free of water, debris or other obstructions? Are they in good repair?		
Are all mats available in good condition? (i.e. lifting corners, or fraying, etc.)		
s the display screen at a comfortable viewing level and positioned to avoid glare?		
Are all electrical cords and wires in good condition, secured and out of the way? Are employee chairs properly adjusted and in good		
condition? Are Parts employees wearing proper PPE? (i.e.		
safety shoes/boots with a non-slip sole) s the mouse, keyboard, telephone or other		
reaching distance and positioned properly for computer users?		
Are all power bars surge protected?		
Are supplies and other material stored in or on shelves or file cabinets properly to avoid overloading and/or tipping?		
Do all desk and file cabinet drawers close properly?		
Are proper Accident/Incident Report forms kept in an accessible location?		
Are employees comfortable, relaxed and positioned as natural as possible while working at the computer or driving?		

	RATE	
POSSIBLE HAZARDS	HAZARD	NOTES/COMMENTS:
	W.H.M.I.S	
Are all "controlled materials" identified by either a Supplier label or a Workplace label?		
Is there an inventory list that identifies what W.H.M.I.S. materials are stored, used and handled at the facility?		
Are there material safety data sheets (MSDS) for each product on the inventory sheet?		
Are the MSDSs available in one central location accessible to all employees?		
Are flammables stored properly?		
Is there an eyewash station in the area?		
Is the eyewash station inspected monthly?		
Any other Concerns? (if yes, indicate in comment column)		
	FIRST AID SAFETY	(
Is there an "In Case of Injury" Poster (Form 82) located at the First Aid Station?		
Is there the appropriate First Aid Kit available at the facility for the number of employees employed?		
Is the First Aid Kit inspected each month?		
Is documentation of inspection available?		
Is there someone with a valid First Aid Certificate of Qualification at the facility?		
Is the certificate of the First Aid Attendant current? (Not more than 3 years from date of certification)		
Is the Joint Health and Safety Committee (JHSC) or the Health and Safety Representative reviewing the First Aid reports?		
Any other Concerns? (if yes, indicate in comment column)		

POSSIBLE I		RATE AZARD	N	OTES	COMMENTS:	
	GENERAL					
Is there a Health and Safety	Policy posted at the					
facility? Are the names and location of the Joint Health and						
Safety Committee members or the name of the						
Health and Safety Representative posted? Are the most recent Joint Health and Safety						
Committee meeting minutes	s posted?					
Are the Ontario Occupations and the Industrial Establish posted where they are easil employees?	ments Regulations y accessible to all					
Any other Concerns? (if yes column)	s, indicate in comment					
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Workers Contacted and the	ir concerns?					
Supervisors Contacted and	Concerns?					
Class "A" Hazard: Serious hazard requiring immediate attention (Stop Work) Class "B" Hazard: Hazard requiring attention as soon as possible. Class "C" Hazard: Hazard requiring attention						
Copies To (For Action):				Date Fo	orwarded:	
Copies To (For Information): Date Forwarded:			orwarded:			
Signature of Inspector. Reviewed by worker Co-Chair (Signature and Date): Reviewed by worker Co-Chair (Signature and Date): (Signature and Date):			Reviewed by Management (Signature and Date)			
Notes:						