

Date of Inspection: _____ Time of Inspection: _____

Project Site: _____

Inspector : _____

HEALTH & SAFETY INSPECTION CHECKLIST

<u>BEFORE</u>	<u>Inspection date:</u>	<u>Location</u>	<u>Company</u>
	<u>Target Closed date:</u>	<u>Actual Closed Date</u>	<u>Action By</u>
	<u>Findings:</u>		
<u>RISK LEVEL:</u>	<u>Hazards :</u>		
	<u>Recommended Action:</u>		
	<u>Action Required :</u>		
	<u>Action By (Contractor):</u>		
<u>AFTER</u>	<u>Inspection Team:</u>		

<u>BEFORE</u>	<u>Inspection date:</u>	<u>Location</u>	<u>Company</u>
	<u>Target Closed date:</u>	<u>Actual Closed Date</u>	<u>Action By</u>
	<u>Findings:</u>		
<u>RISK LEVEL:</u>	<u>Hazards :</u>		
	<u>Recommended Action:</u>		
	<u>Action Required :</u>		
	<u>Action By (Contractor):</u>		
<u>AFTER</u>	<u>Inspection Team:</u>		

<u>BEFORE</u>	<u>Inspection date:</u>	<u>Location</u>	<u>Company</u>
	<u>Target Closed date:</u>	<u>Actual Closed Date</u>	<u>Action By</u>
	<u>Findings:</u>		
<u>RISK LEVEL:</u>	<u>Hazards :</u>		
	<u>Recommended Action:</u>		
	<u>Action Required :</u>		
	<u>Action By (Contractor):</u>		
<u>AFTER</u>	<u>Inspection Team:</u>		

<u>BEFORE</u>	<u>Inspection date:</u>	<u>Location</u>	<u>Company</u>
	<u>Target Closed date:</u>	<u>Actual Closed Date</u>	<u>Action By</u>
	<u>Findings:</u>		
<u>RISK LEVEL:</u>	<u>Hazards :</u>		
	<u>Recommended Action:</u>		
	<u>Action Required :</u>		
	<u>Action By (Contractor):</u>		
<u>AFTER</u>	<u>Inspection Team:</u>		