

MONTHLY INDUSTRIAL SAFETY AND HEALTH CHECKLIST (DSCC)

Period Covered: _____ Bldg: _____

Organization Inspected: _____ To: _____

This checklist is intended to assist you during your inspections. It covers items which could pose a potential hazard to associates if allowed to go uncorrected. Your inspection should cover all areas, which your associates utilize on a regular basis including common use area. If you discover anything that is not listed, please place under "other".

MONTHLY INDUSTRIAL SAFETY AND HEALTH CHECKLIST (DSCC)

THINGS TO LOOK FOR	N/A	YES	NO	LOCATION	ACTION TAKEN/DATE
1. FIRE SAFETY ITEMS					
a. Extinguisher locations marked and accessible					
b. Extinguishers serviceable					
c. Alarm locations marked and easily accessible					
d. Sprinkler heads free of obstructions					
e. Evacuation routes posted and free of obstructions					
f. Fire doors and brackets in working condition					
g. Safety cans and cabinets in good condition and used for flammables					
h. Oily rags in covered container					
2. EQUIPMENT RELATED ITEMS					
a. Hand tools in good repair					
b. Power tools in good repair					
c. Tops of lockers and tool boxes free of unnecessary material					
d. Pallets in good condition					
e. Racks in good condition i.e., no evidence of damage					
f. Power cords in good condition					
g. Guards on machinery in place and in good condition					
h. Area around machinery clean and free of rags, paper, trash					
i. Machinery free of oil and grease drippings					
j. Bridge plates in good condition					
k. PPE clean and in good condition					
l. Material Handling equipment in safe operating condition					
m. Vehicles in safe operating condition					
n. Hoisting equipment in safe operating condition					
o. Chains and slings in good condition with no evidence of damage					
p. Towveyor carts in good condition with no evidence of damage.					
q. Ladders in good condition, i.e., no loose, bent, broken, missing or damaged parts; no wobbling or evidence of instability from strain, fatigue, or overuse; no evidence of deterioration from environmental factors					
3. FACILITY RELATED ITEMS					
a. Floors free of oil and grease					
b. Floors in good condition, i.e., no evidence of holes or other damage					
c. Aisles free of obstructions					
d. MHE aisles properly marked					
e. Windows and walls in good condition with no evidence of damage					
f. Pedestrian and overhead doors in good condition					
g. Roof supports and columns in good condition with no evidence of damage					

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THINGS TO LOOK FOR	N/A	YES	NO	LOCATION	REMARKS/ ACTION TAKEN/DATE
h. Loading docks in good condition					
i. Roads and grounds in good condition					
j. Guard rails in good condition					
k. Night lights working					
l. Access to electrical panels is clear					
m. Safety shower and eye wash locations clearly marked and easily accessible					
n. Safety shower and eye wash units in good condition, was flushed for minimum of 15 minutes.					
o. Portable unit has been flushed and preservative changed. (Every 6 months)					
4. CHEMICAL RELATED ITEMS					
a. Flammable liquids in excess of 25 gallons are stored in approved cabinets					
b. Have new/changed products/manufacturers been reported to DW this month					
c. Labels on containers legible					
d. Containers in good condition and tightly closed					
e. Acids and cleaning compounds stored separately					
f. Spill absorbent material available					
5. COMMON USE AREAS					
a. Stairs free of obstructions					
b. Floors and walking surfaces in good condition					
c. Drinking fountains clean					
d. Restrooms in good condition					
e. Break areas/Cafeteria in good condition					
f. Lights in good working order					
g. Exit lights in good working order					
6. OTHER ITEMS					
a. Stock loaded safely on pallets					
b. Stock stacked, piled and arranged daily					
c. Trash containers in good condition and emptied regularly					
d. Area free of trash					
e. Sweeping compound available for dust control					
7. OTHER ITEMS NOTED					
8. MICROWAVE OVEN					
Note: If there is a NO for any of these conditions, discontinue use immediately. Contact the Safety and Health Office, to inspect the unit.					
a. Exterior, door hinges, and power cord are in good condition.					
b. Door seals or gaskets are in good condition.					
c. Immediately turns off when door is opened.					
d. Cycles and cooks according to manufacturers directions.					
e. No burns to interior of oven compartment (holes, craters, surface melted).					
f. No unit sparks during cooking cycle.					
g. Lining of cooking compartment/door is in good condition, no panel split or broken.					
Remarks: (If more space is needed attach separate sheet.)					
Inspector: _____		Date: _____			
Reviewer: _____		Date: _____			
Received By Safety Office: (Date) _____					