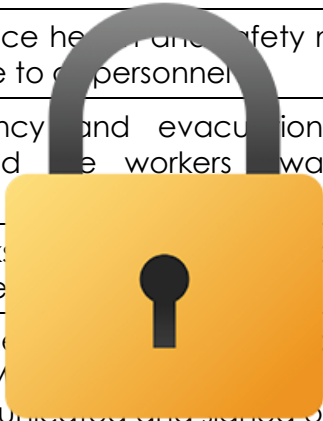


SAFETY INSPECTION CHECKLIST

Work Site:	Inspected By:	Date:
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Checklist		Compliance			Actions Required / Comments	Actions Required By <small>(Responsible Person)</small>	Date Required
General Safety							
1.	Are the risk control measures outlined in risk assessments implemented and followed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
2.	Is the workplace health and safety management plan available to all personnel?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
3.	Are emergency and evacuation procedures available and are workers aware of these procedures?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
4.	Are safety talks conducted on a regular basis at the workplace and are they recorded?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
5.	Have any amendments to the Workplace Health and Safety Management System (SWMS) been noted, communicated and signed off upon?						
6.	Have all workers and contractors completed the site induction?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
7.	Is the level of supervision adequate for all workers and apprentices?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
8.	Do all workers have the required qualifications and competencies for their tasks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			



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Checklist		Compliance			Actions Required / Comments	Actions Required By (Responsible Person)	Date Required
9.	Is there a record of worker qualifications and competencies on site?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
10.	Have all workers received adequate information and training to perform their tasks?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
11.	Have all contractors submitted the required safety documentation (SWMSs, JSAs, risk assessments, etc)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
12.	Are all 'at risk activities' being performed in compliance with the current SWMS and risk assessments?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
13.	Have all workers signed off on their SWMSs?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
14.	Have all the required work, completed and are they available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
15.	Are all entry and exit points observed and slip, trip or fall hazards?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
16.	Unauthorized access to work areas is prevented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
17.	Is there appropriate signage and barricading in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
18.	Is there adequate space for the storage of materials, equipment and plant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			
19.	Are work areas (including offices) tidy and is rubbish disposed of appropriately?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A			



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