[Company name]

How to use this document: delete this paragraph before saving, sharing, or circulating it. Every part shown in blue is yours to replace: type your own details over each blue [field] until no blue remains. Add or remove table rows to fit your needs. Then select all (Ctrl+A) and set the font colour to the same dark colour throughout. What is left is your finished document.

Workplace safety inspection checklist

A walk-through inspection record - area by area, hazards noted, actions assigned.

Inspection date	[Date]
Inspected by	[Name, role]
Area / site	[Area name]
Next inspection due	[Date]

Inspection findings

No.	Item	Standard	Status	Notes
1	Fire exits and escape routes	Clear and unlocked	[OK / Issue]	[Notes]
2	Fire extinguishers and alarms	In date, accessible	[OK / Issue]	[Notes]
3	Electrical equipment and cables	No damage, PAT in date	[OK / Issue]	[Notes]
4	Lighting (general and emergency)	All working	[OK / Issue]	[Notes]
5	Floors, stairs and walkways	No trip hazards, handrails sound	[OK / Issue]	[Notes]
6	Storage and racking	Stable, within load limits	[OK / Issue]	[Notes]
7	Machinery guards	Fitted and secure	[OK / Issue]	[Notes]
8	Hazardous substances (COSHH)	Labelled, stored correctly	[OK / Issue]	[Notes]
9	PPE availability	Correct types available	[OK / Issue]	[Notes]
10	First aid kit	Stocked, in date	[OK / Issue]	[Notes]
11	Welfare facilities	Clean, hot water, drinking water	[OK / Issue]	[Notes]

12	Housekeeping	Tidy, waste removed	[OK / Issue]	[Notes]

Actions required

Action	Owner	Due date	Completed
[Action]	[Name]	[Date]	
[Action]	[Name]	[Date]	

Sign-off

Inspector	Manager	Date