

PSU GENERAL WORKPLACE SAFETY INSPECTION FORM Date: Inspector(s): Building: Department: Yes No N/A A. HOUSEKEEPING: (1) Does the area have a clean and orderly appearance? (2) Are hallways and aisles free from tripping hazards and not used for storage? (3) Are cords, cables, hoses adequately restrained? (4) Is the area free from any standing liquids or other slip hazards? **B. CHEMICAL SAFETY:** (1) Are all chemical containers clearly labeled as to their contents? (2) Is labeling clearly legible & are containers in good condition? (3) Are all chemical containers capped when not in use? (4) Are incompatible materials properly segregated? C. PERSONAL PROTECTIVE EQUIPMENT: (1) Is appropriate eye protection available and used where required? (2) Is appropriate hand protection available and used where required? (3) Is appropriate foot protection available and used where required? (4) Is hearing protection available and used when noise levels exceed 85 dBA? (5) Is respiratory protection available and used where required? (6) Are employees medically cleared and fit tested prior to respirator use? (7) Are showers/eye wash stations labeled, accessible, and free from obstructions? (8) Are eye washes and drench hoses flushed weekly? (9) Are showers flushed annually? **D. FIRE PROTECTION:** (1) Are exits clearly identified and accessible? (2) Are fire extinguishers available and clearly accessible? (3) Are all fire extinguishers mounted to the wall? (4) Have all fire extinguishers been serviced within the past 12 months? (5) Are emergency pull stations visible and clearly accessible? (6) Do sprinkler heads have at least 18 inches of vertical clearance? (7) Are all fire doors securely closed? (8) Are flammable materials properly stored in approved containers/cabinets? (9) Is emergency lighting adequate? E. ELECTRICAL SAFETY: (1) Is the area free from exposed wiring/frayed cords? (2) Are electrical cords not pinched, strained, or run underneath carpeting? (3) Is at least three feet of clear space provided in front of all electrical panels? (4) Are all electrical openings (knockouts) covered? (5) Do all electrical outlets and switches have faceplates installed? (6) Are multi-outlet power strips UL listed and equipped with circuit breakers? (7) Is overloading of outlets/power strips avoided?

	Yes	No	N/A
F. EQUIPMENT/MACHINERY:			
(1) Is equipment free from any exposed moving parts/pinch points?			
(2) Is machine guarding in good condition and working properly?			
(3) Are emergency stop mechanisms identified and working properly?			
(4) Are all equipment controls clearly labeled?			
(5) Are all warning stickers legible?			
(6) Is equipment adequately ventilated?			
G. MATERIAL STORAGE AND HANDLING:			
(1) Is all material stacked in a stable manner?			
(2) Is shelving secure and free from damage?			
(3) Are compressed gas cylinders properly secured?			
(4) Are overhead objects secure?			
(5) Do employees use proper manual lifting techniques?			
(6) Are mechanical devices available for use with heavy loads (> 50 pounds)?			
(7) Are employees trained and authorized to operate lift trucks?			
H. OCCUPATIONAL HEALTH:			
(1) Does ventilation have adequate flow (no excessive fumes/dust accumulation)?			
(2) Are exhaust ducts in good condition?			
(3) Is local ventilation used where required?			
(4) Are noise levels not excessive?			
(5) Is lighting adequate?			
(6) Are there any repetitive motion concerns or awkward work postures?			
I. HAZARDOUS WASTE:			
(1) Are waste materials placed in the proper receptacles?			
(2) Is waste removed on a routine basis?			
(3) Are waste containers properly labeled?			
(4) Are spill cleanup materials available?			
J. MISCELLANEOUS:			
Note any other miscellaneous hazards not covered by checklist:			
COMMENTS:			
Note any comments related to specific hazards uncovered during the inspection:			