



# INTEGRATED MANAGEMENT SYSTEM

Document No.: BPDB-IMS-CL-001

Revision No.: 00

Revision Date: 01-11-2021

## WORKPLACE INSPECTION CHECKLIST

Page 1 of 2

### Form/Record

Site Name: \_\_\_\_\_ Location: \_\_\_\_\_

Inspected by: \_\_\_\_\_ Date: \_\_\_\_\_

Items to be checked & inspected	Status	Remarks
Safety Sign, Safety Signage & Warning		
Hand Power Tools, Chains & Slings		
Ladders & Scaffolding		
Hot Works, Welding, Cutting		
Electrical Hazard & Safety		
Machine Hazards & Safety		
Fire Hazard & Fire Safety		
Flammable Liquid & Materials		
Personal Protective Equipment		
Chemical Hazard & Safety		
First Aid Box		
Waste Management		
Clearance of Walkways, Fire Equipment, Exits, Doors, Stairs		
Air, Lighting, Ventilation & Noise		
Housekeeping & Sanitation		

Prepared By

Reviewed By

Approved By



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Page 2 of 2

Spillage & Leakage

### OVERALL EVALUATION:

- Excellent
- Very Good
- Good
- Poor

Name :  
Signature :  
Designation :

Name :  
Signature :  
Designation :

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