

**UNIVERSITY OF NEW ORLEANS**  
**Work / Construction Area Inspection Report**  
ENVIRONMENTAL HEALTH AND SAFETY OFFICE

Campus Location / Building: \_\_\_\_\_ Room Number: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

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**Power Equipment**

- 1 Is equipment checked for exposed wiring, frayed cords, deteriorating insulation, proper grounding on a "per use" basis ? Yes\_\_ No\_\_ N/A\_\_
- 2 Are all guards in place? Yes\_\_ No\_\_ N/A\_\_
- 3 Are operating switches and safety switches in working order? Yes\_\_ No\_\_ N/A\_\_
- 4 Are breaking mechanisms in working order? Yes\_\_ No\_\_ N/A\_\_
- 5 Are cutting blades sharp? Yes\_\_ No\_\_ N/A\_\_
- 6 Are nuts, bolts, and other connectors snug and fast? Yes\_\_ No\_\_ N/A\_\_
- 7 Is hydraulic equipment regularly inspected for proper fluid levels, leaks, proper connections, etc? Yes\_\_ No\_\_ N/A\_\_

**Hand tools (hammers, chisels, socket wrenches, etc.)**

Maintenance:

- 8 Are cutting edges sharp? Yes\_\_ No\_\_ N/A\_\_
- 9 Are handles not split or cracked? Yes\_\_ No\_\_ N/A\_\_
- 10 Are hand tools protected from damage during transport to job site or when stored? Yes\_\_ No\_\_ N/A\_\_
- 11 Are hand tools stored properly when not in use? Yes\_\_ No\_\_ N/A\_\_

**Grinders/Cutting Tools**

- 12 Are the wheels covered? Yes\_\_ No\_\_ N/A\_\_
- 13 Is the power switch labeled and easily accessible? Yes\_\_ No\_\_ N/A\_\_
- 14 Is it securely fastened? Yes\_\_ No\_\_ N/A\_\_
- 15 Do safe guards meet the minimum standards?
  - Do they prevent workers body parts from making contact with moving parts? Yes\_\_ No\_\_ N/A\_\_
  - Do they prevent objects from falling into the moving parts? Yes\_\_ No\_\_ N/A\_\_
  - Do they permit relatively easy operation of the device? Yes\_\_ No\_\_ N/A\_\_

**Wheelbarrows/Hand trucks**

- 16 Handles are not cracked or broken? Yes\_\_ No\_\_ N/A\_\_
- 17 Are all body bolts secure? Yes\_\_ No\_\_ N/A\_\_
- 18 Are pneumatic tires properly inflated? Yes\_\_ No\_\_ N/A\_\_

**Garbage Containers**

- 19 Are they properly stored when not in use? Yes\_\_ No\_\_ N/A\_\_
- 20 Are handles and lids free of cracks? Yes\_\_ No\_\_ N/A\_\_

21 Are containers free of sharp/jagged edges? Yes\_\_ No\_\_ N/A\_\_

**Chemicals**

22 Are chemicals properly stored (cool, dry, isolated) Yes\_\_ No\_\_ N/A\_\_

23 Is personal protective gear used when people are exposed to chemicals? (gloves, goggles, respirators, aprons) Yes\_\_ No\_\_ N/A\_\_

24 Is the protective gear in good condition? Yes\_\_ No\_\_ N/A\_\_

25 Are warning labels properly followed? Yes\_\_ No\_\_ N/A\_\_

26 Are leaks or other hazards promptly identified and reported? Yes\_\_ No\_\_ N/A\_\_

27 Are MSDS sheets for all chemicals, being stored and used at each site, available at each job site? Yes\_\_ No\_\_ N/A\_\_

**Personal Protective Equipment**

28 Is appropriate protection provided for each type of job? Yes\_\_ No\_\_ N/A\_\_

- eye protection- with side shields
- footwear- no sandals or tennis shoes
- shirts- no tank tops
- hearing protection- malleable throw away plugs
- breathing protection- dust masks, respirators
- head protection- hard hats
- hand protection- gloves

**General Safety**

29 Is the supervisor aware of an active, *written* safety program, and has he taken steps to implement it? Yes\_\_ No\_\_ N/A\_\_

30 Does the supervisor inspect his area and equipment on a regular basis? Yes\_\_ No\_\_ N/A\_\_

31 Is equipment used in a proper manner as not to make it unsafe to use? Yes\_\_ No\_\_ N/A\_\_

32 Does the supervisor coordinate with other departments to report damaged, faulty, or unsafe equipment and or unsafe practices? Yes\_\_ No\_\_ N/A\_\_

33 Is “horsing around” prohibited around equipment and other work areas? Yes\_\_ No\_\_ N/A\_\_

34 Are procedures for receiving first aid and emergency notification posted? (names and phone numbers of who is to be contacted) Yes\_\_ No\_\_ N/A\_\_

**Fire Protection**

35 Are fire extinguishers selected for the types of combustible and flammable materials for the areas where they are to be used? Yes\_\_ No\_\_ N/A\_\_

- Class A- (combustible materials; wood, paper, grass, etc)
- Class B- (flammable liquids; grease, gasoline, oil, etc.)

Class C- (electrical fires)  
Class ABC- (any of the three above or combination there of)  
Class D- (combustible metals; magnesium, sodium)

- 36 Are extinguishers fully charged and kept in designated places? Yes\_\_ No\_\_ N/A\_\_  
37 Are extinguishers located along normal paths of travel? Yes\_\_ No\_\_ N/A\_\_  
38 Are fire extinguisher stations visibly labeled? Yes\_\_ No\_\_ N/A\_\_  
39 Are extinguishers checked monthly (by management or designated person) to see if they are in place, if the pressure is OK, etc. Yes\_\_ No\_\_ N/A\_\_  
40 Have extinguishers been tested by an external company and is a current validation tag visible on each extinguisher? Yes\_\_ No\_\_ N/A\_\_

**Miscellaneous**

- 41 Are all sinks clean and free of debris? Yes\_\_ No\_\_ N/A\_\_  
42 Are all emergency showers and/or eye wash stations operative? Yes\_\_ No\_\_ N/A\_\_  
Last inspection date: \_\_\_\_\_

If any "NO" answers were checked, please list the number of the problem cited and explain. Also please record any suggestions and recommendations to remedy the problem. Please use the following space to write your comments.

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