

Office Area Health and Safety Inspection Quicklist

Dept: _____

Building/rm: _____

Inspector: _____

Date Inspected: _____

= Satisfactory = Needs improvement

Work Environment Safety

Description	Corrective Action Needed	Date
<input type="checkbox"/> Employees work areas are adequately illuminated.		
<input type="checkbox"/> Employees are not engaged in ergonomic hazards, e.g. awkward posture, prolonged repetitive motion, contact stress, etc.		
<input type="checkbox"/> Employees work areas are clean, orderly and don't present a hazard		
<input type="checkbox"/> Employees are not engaged in unsafe acts, e.g. using chairs as stepstools, using multiple extension cords, etc.		

Walking Surfaces

<input type="checkbox"/> Aisles correctly established and clear		
<input type="checkbox"/> No tripping hazards in evidence		
<input type="checkbox"/> Floors dry - not slippery		
<input type="checkbox"/> Cords not stretched across aisles or under carpets		
<input type="checkbox"/> Entrance mats available and used in wet weather		
<input type="checkbox"/> Carpet is secure and free of tears, lumps or loose pieces		

Stairways, Aisles, Storage Rooms, Halls, Emergency Exits, Fire Extinguishers

<input type="checkbox"/> Adequate lighting in stairways, aisles and storage rooms		
<input type="checkbox"/> Stairways clear - not cluttered		
<input type="checkbox"/> Stair treads in good condition		
<input type="checkbox"/> Handrails installed and in good condition		
<input type="checkbox"/> Halls kept clear of equipment and supplies		
<input type="checkbox"/> Emergency exit doors clearly marked and accessible		
<input type="checkbox"/> Fire extinguishers accessible and fully charged		

Bookcases, Shelves, Cabinets

<input type="checkbox"/> Bookcases and shelves not overloaded		
<input type="checkbox"/> Heavy storage shelves secured to wall		
<input type="checkbox"/> File drawers closed when not in use		
<input type="checkbox"/> Bookcases and cabinets secured against tipping		

Electrical Safety, Chairs, Chemical Products, Step Stools, Ladders, Air Movement

<input type="checkbox"/> Electrical outlets not overloaded		
<input type="checkbox"/> Equipment properly grounded (3 pronged plugs)		
<input type="checkbox"/> Electrical cords and plugs in good condition		
<input type="checkbox"/> Extension cords not substituted for permanent wiring		
<input type="checkbox"/> Chairs in good mechanical condition (springs/casters)		
<input type="checkbox"/> Chemical products properly used, stored and labeled		
<input type="checkbox"/> Paper cutter equipped with guard/ blade spring functioning		
<input type="checkbox"/> Safe step stools and ladders properly used when needed		
<input type="checkbox"/> Paper shredder guarded		
<input type="checkbox"/> Unobstructed air movement and vents		