

# Public Transport Passenger Safety Audit Form

## Basic Information

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Date of Audit

Audit Location

Route/Line

Type of Vehicle

## Audit Checklist

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Adequate Lighting (inside/outside vehicle, stops, stations)

Presence of CCTV/surveillance

Staff/Personnel presence

Emergency communication available (intercom, help points)

Visible Safety Information/Signage

Accessibility features (e.g. ramps, priority seating)

Crowding Level

Cleanliness

## Observations & Comments

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Safety concerns observed

Suggestions for improvement

Auditor Name

Signature