

Equipment Safety Inspection Checklist

Equipment Name

Location

Date

Inspector

Item	Inspection Criteria	Pass	Fail	Comments
Physical Condition		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Controls/Labels		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Power Supply		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Guards/Safety Devices		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Emergency Stop		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Other		<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Overall Comments