

Conveyor Belt Safety Inspection Record

Date:

Inspected By:

Department/Area:

Conveyor ID/Location:

Inspection Checklist

Item	Condition (✓/✗)	Comments
Guards and covers in place		
Emergency stop accessible and working		
Belt alignment and tension OK		
Rollers and pulleys in good condition		
No accumulation of material or debris		
Warning signs visible		
Lubrication points maintained		
Other (specify)		

Corrective Actions Required:

Inspector Signature:

Date: