

Safety Management System (SMS) Compliance Audit

General Information

Organization Name

Audit Date

Auditor(s)

Audit Summary

Overall Findings

Checklist

SMS Element	Requirement	Compliant	Comments
Safety Policy		<input type="text"/>	<input type="text"/>
Safety Risk Management		<input type="text"/>	<input type="text"/>
Safety Assurance		<input type="text"/>	<input type="text"/>
Safety Promotion		<input type="text"/>	<input type="text"/>

Observations & Recommendations

Auditor's Signature

Name

Date