

Chemical Tanker PPE Compliance Checklist

Vessel Name

Date

Inspected By

PPE Items Checklist

PPE Item	Compliance	Remarks
Chemical Resistant Coveralls	<input type="checkbox"/>	<input type="text"/>
Chemical Resistant Gloves	<input type="checkbox"/>	<input type="text"/>
Face Shield	<input type="checkbox"/>	<input type="text"/>
Safety Goggles	<input type="checkbox"/>	<input type="text"/>
Safety Helmet	<input type="checkbox"/>	<input type="text"/>
Safety Shoes/Boots	<input type="checkbox"/>	<input type="text"/>
Respirator/Mask	<input type="checkbox"/>	<input type="text"/>
Hearing Protection	<input type="checkbox"/>	<input type="text"/>
Personal Gas Detector	<input type="checkbox"/>	<input type="text"/>
Harness & Lanyard (if required)	<input type="checkbox"/>	<input type="text"/>

Additional Comments

Inspector's Signature