

# Equipment Safety Checklist

**Equipment Name:**

**Non-Mechanical Hazards**

Is there a potential noise hazard?	<b>Yes</b>	<b>No</b>	If yes, what PPE is needed?
Does the equipment produce harmful substances?	<b>Yes</b>	<b>No</b>	If yes, what PPE is needed?

**Mechanical Inspection**

Power Sources			Power Transmission				Points of Operation				
Place a check by all observed sources:			Place a check by all observed components:				Describe the work observed at the operation points.				
Electrical	<input type="checkbox"/>		Belt and pulley	<input type="checkbox"/>							
Mechanical (Power take-off)	<input type="checkbox"/>		Chain and sprocket	<input type="checkbox"/>							
Combustion engine	<input type="checkbox"/>		Gears	<input type="checkbox"/>							
Hydraulic	<input type="checkbox"/>		Hoses	<input type="checkbox"/>							
Pneumatic	<input type="checkbox"/>		Cylinders and rods	<input type="checkbox"/>							
Are all power sources connected properly?	<b>Yes</b>	<b>NO</b>	Are any power transmission components exposed?	<b>Yes</b>	<b>NO</b>	Is there point of operation safeguards for the equipment?	<b>Yes</b>	<b>NO</b>			
Are all power sources safeguarded?	<b>Yes</b>	<b>NO</b>	Do any power transmission components need maintenance?	<b>Yes</b>	<b>NO</b>	Have safeguards been tampered with or removed?	<b>Yes</b>	<b>NO</b>			
What maintenance do you recommend?			What maintenance do you recommend?				What maintenance do you recommend?				

**Mechanical Hazards**

Place a check by any motions or actions that are potential hazards for each equipment area. Record the type of guard preventing injury from that action or motion.

Action or Motion	Power Source		Power Transmission		Point of Operation	
	<input type="checkbox"/>	Type of Guard in Place	<input type="checkbox"/>	Type of Guard in Place	<input type="checkbox"/>	Type of Guard in Place
Rotating	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
In-Running Nip Points	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Reciprocating	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Transversing	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Cutting	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Punching	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Shearing	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
Bending	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

*\* Types of guards: Fixed, Interlocked, Adjustable, Self-adjusting*

**Hazard Prevention**

Where are the operating controls located?
How is the equipment isolated (locked out) from its energy source before a technician performs maintenance?
What hazards should the operator be aware of before using the equipment?
What PPE should an operator wear to prevent injuries from mechanical hazards?