MONTHLY SAFETY SELF-INSPECTION

Date		**Inspected by**	
Site or building			

Area walked	

Exits and fire

Item	OK	Defect	N/A	Notes
Exit doors open from the inside, with a clear path to each	☐	☐	☐	
Exit signs lit, and doors that aren't exits marked	☐	☐	☐	
Emergency lights work	☐	☐	☐	
Fire extinguishers in place, charged and monthly check recorded	☐	☐	☐	
Oily rags and flammables stored right	☐	☐	☐	

Electrical

Item	OK	Defect	N/A	Notes
Clear space in front of electrical panels	☐	☐	☐	
Cords and plugs	☐	☐	☐	
Panel and box covers on, unused openings closed	☐	☐	☐	
Cord-connected tools checked before use	☐	☐	☐	

Machine guarding

Item	OK	Defect	N/A	Notes
Guards on belts, pulleys, chains and gears	☐	☐	☐	
Guards where the work happens (saws, presses, shears, drills)	☐	☐	☐	
Emergency stops and power shut-offs within the operator's reach	☐	☐	☐	
Bench grinders	☐	☐	☐	
Lockout locks and tags on hand	☐	☐	☐	
Lockout procedure inspected in the last 12 months	☐	☐	☐	

Walking surfaces

Item	OK	Defect	N/A	Notes
Aisles and walkways clear	☐	☐	☐	
Floors clean and dry	☐	☐	☐	
Stairs, platforms and guardrails	☐	☐	☐	
Floor holes and ladders	☐	☐	☐	

Chemicals and hazard communication

Item	OK	Defect	N/A	Notes
Chemical list and written program current	☐	☐	☐	
Safety data sheets (SDS) for every chemical	☐	☐	☐	
Containers labeled	☐	☐	☐	
Compressed gas cylinders	☐	☐	☐	

Personal protective equipment (PPE)

Item	OK	Defect	N/A	Notes
Eye and face protection	☐	☐	☐	
Hearing protection	☐	☐	☐	
Gloves, safety shoes and hard hats	☐	☐	☐	
Respirators, if anyone wears one	☐	☐	☐	

First aid

Item	OK	Defect	N/A	Notes
First aid kits stocked and easy to reach	☐	☐	☐	
Eyewash and shower where chemicals are handled	☐	☐	☐	
A trained first aider on each shift, if no clinic is nearby	☐	☐	☐	
Emergency numbers posted	☐	☐	☐	

Forklifts (skip if you have none)

Item	OK	Defect	N/A	Notes
Daily check sheets filed	☐	☐	☐	
Operator training and evaluation in date	☐	☐	☐	
Horn, seat belt, overhead guard and capacity plate	☐	☐	☐	
Trucks that need repair	☐	☐	☐	

Records and postings

Item	OK	Defect	N/A	Notes
OSHA poster up	☐	☐	☐	
Injury and illness log (Form 300) current	☐	☐	☐	
Annual summary (Form 300A) posted Feb 1 to Apr 30	☐	☐	☐	
Training records on file	☐	☐	☐	
Last month's findings	☐	☐	☐	

Add for your workplace: Fabrication shop

Item	OK	Defect	N/A	Notes
Hot work: fire watch where sparks could start a fire, kept 30 minutes after	☐	☐	☐	
Welding gas cylinders capped, stored safely, oxygen apart from fuel gas	☐	☐	☐	
Weld fume ventilation running	☐	☐	☐	
Press brake and shear: point of operation guarded	☐	☐	☐	
Spray booth: fan on, filters changed, no flames or sparks, rags in metal cans	☐	☐	☐	
Crane inspections up to date; slings checked before each use, a damaged sling out of service	☐	☐	☐	

Add for your workplace: Warehouse

Item	OK	Defect	N/A	Notes
Racking: no bent or struck uprights or beams, loads stable	☐	☐	☐	
Dock: trailer wheels chocked, dock plate secure	☐	☐	☐	
Battery charging area: designated, ventilated, spill gear on hand, no smoking	☐	☐	☐	
Aisles and dock doorways wide enough for trucks	☐	☐	☐	

Add for your workplace: Small construction contractor

Item	OK	Defect	N/A	Notes
Fall protection, scaffolds and ladders checked before work	☐	☐	☐	
A competent person inspects the site and equipment regularly	☐	☐	☐	

Findings (what, where)

Priority: Urgent (same day), High (next day), Normal (within 7 days), Low (within 14 days).

ID (SI-__)	What and where	Priority	Owner	Fix by

Sign-off

Last month's findings closed?	☐ Yes ☐ No, see findings
Signed	

Free template from goodtaco.ai/blog/osha-inspection-checklist. Copy, change and print it as you like.