

Jobsite Inspection Checklist

Site/Project Name:			Date:	
Location:			# of Workers:	
Conducted By:				
S – Satisfactory	NS – Not Satisfactory			NA – Not Applicable
Item Inspected	S	NS	NA	Requires Immediate Action
1. SITE ACCESS	S	NS	NA	
Clean, level ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Adequate ramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Adequate stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Adequate ladders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. HOUSEKEEPING	S	NS	NA	
Clear walkways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Clear work areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Clear access and landing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. PERSONAL PROTECTIVE EQUIPMENT	S	NS	NA	
Head protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Foot protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Eye protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Hearing protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Respiratory protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Fall protection (plan, rescue)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. LADDERS	S	NS	NA	
Secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper angle (extension ladders)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper size and type	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Safe, usable condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Properly used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper Handrail and landings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Non-slip bases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. SCAFFOLDS	S	NS	NA	
Properly erected (all parts used)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Properly secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Properly planked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper guardrails, toe boards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper access to platform	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Acceptable loading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. POWER TOOLS, EQUIPMENT	S	NS	NA	
General condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Proper guards, cords, PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tagging as DEFECTIVE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

7. STAIRWELLS & RAMPS	S	NS	NA
Proper filler blocks in metal stairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper cleats on ramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate lighting in stairwells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper handrails or guardrails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. TRAFFIC CONTROL	S	NS	NA
Trained traffic controllers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly located	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean, regulation sign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly dressed (including vest)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. PUBLIC WAY PROTECTION	S	NS	NA
Properly located (within 4.5 m)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entrances clearly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covered where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Min. height, width requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper rail on street side	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper lighting, where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. FALL PROTECTION	S	NS	NA
CSA approved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe, usable condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unprotected openings and edges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working from: Ladders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scaffolds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swingstages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. GUARDRAILS, BARRICADES	S	NS	NA
Located where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly constructed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequately secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. GAS CYLINDERS	S	NS	NA
Properly located	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly moved or lifted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly hooked up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. CONFINED SPACES	S	NS	NA
Proper access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air testing before entry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rescue equipment readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety harness, lifeline properly anchored & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Second person for rescue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing air monitored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entry permit where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. FIRST AID REQUIRMENTS	S	NS	NA
Adequate qualified first aiders on jobsite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First aid kits: Adequate number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate contents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. FIRE PROTECTION	S	NS	NA
Master emergency plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extinguishers where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fully charged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequately identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. CRANES, HOISTS, ETC.	S	NS	NA
Safe setup of equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance log available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competent operator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of slings, hardware	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety catches on all hooks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper use of tag lines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper lifting containers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Competent signaller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. WELDING	S	NS	NA
Rods & cylinders properly labeled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MSDSs readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly secured ground cables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper eye protection worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper screens and exhaust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas cylinders upright and secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fire extinguisher readily available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. ELEVATING WORK PLATFORM	S	NS	NA
Worker training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Properly used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe, usable condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Acceptable loading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manufacturer's operating manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. TRENCHES & EXCAVATIONS	S	NS	NA
Properly sloped, where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excavated soil properly placed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate shoring used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper access to trench	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper storage of materials in and above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. EXTENSION CORDS	S	NS	NA
Outdoor-type, rated over 300 volts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition of casing, ends, connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

GFCIs used where required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. TEMPORARY POWER SUPPLY	S	NS	NA	
Properly identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Overhead lines flagged & secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Surface cables buried or protected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. MATERIALS STORAGE	S	NS	NA	
Properly located	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safely piled, stacked, bundled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Properly moved or lifted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Properly labeled (WHMIS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. FORMWORK	S	NS	NA	
Guardrails and fall-arrest system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Design drawings kept on project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Inspection statement by engineer or competent worker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. SUSPENDED SCAFFOLDS	S	NS	NA	
Properly attached and capable of at least 4 times maximum load	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outrigger beam tied to fixed support with adequate counterweight	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All mechanical/electrical devices in good working condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Independent lifelines for each worker (extend to ground)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Engineer's drawing on site if required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
25. SIGNS & PRINT MATERIAL	S	NS	NA	
OH&S Act and regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WSIB Form 82 poster	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MSDSs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Warning signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency phone list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Report forms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
26. WORKER EDUCATION	S	NS	NA	
WHMIS training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Company safety policy & program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Injury reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hazard reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
OH&S Act and Regulations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal H&S responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. HYGIENE	S	NS	NA	
Washroom facilities available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cleanliness of facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Injury/hazard reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Personal responsibilities

Safety policies and procedures

Other
