



Inspection - Weekly 274 Checklist

274 Inspection -Diamond Drilled Core Cutting Room - Checklist

Item #	Prompt	Responses	Comments
1	1.0:General House Keeping	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
2	Emergency evacuation procedure available and accessible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
3	All exits are clearly labelled with exit signs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
4	First Aid Kit available and checklist updated (monthly) labelled clearly with signage and accessible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
5	Adequate lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
6	Workstations, Equipment and walkways are clearly labelled/demarcated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
7	Mandatory PPE posted clearly (gloves, clear glass, apron, boots), used correctly and in good condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
8	All electric switches labelled, and electrical equipment tested and tagged	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
9	SWPs for cutting and using machineries have been updated and familiarized by all team members	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
10	Prestart check book available and completed for the shift	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
11	Adequate # of Fire Extinguisher available, tested and tagged, charged	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
12	Are the people working inside the prep lab wearing the appropriate PPE?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
13	Building is generally in good condition	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
14	Storage shelves stacked with accessories in order and neat with labels clearly visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
15	Floor clean and free of slip/trip and fall hazards	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
16	No accumulation of excessive dust and rock chips on equipment, building wall, switch boards, floor etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
17	2.0:Waste Storage Area	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
18	SWP for waste storage and removal available and updated	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Item #	Prompt	Responses	Comments
19	Storage area clearly labelled and visible	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
20	Safety signage posted clearly during cutting time	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
21	Waste stored/stacked neatly and safe with no slip/trip and fall risk	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
22	Sump barricaded	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
23	Empty waste buckets available for waste storage	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
24	Sump cleaned regularly (monthly)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
25	Storage area clean and tidy	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	