OCCUPATIONAL HEALTH AND SAFETY ACT NO 85 OF 1993

CRITICAL EQUIPMENT CONTROL SHEET

COMPANY: _____ SITE: _____ DATE: _____

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NO	ITEM	APPLICABLE YES/NO	MAINTAINED YES/NO	RESPONSIBLE PERSONS / CONTRACTOR	COMMENTS	RECOMMENDED FREQUENCY
1	Fire equipment	Yes	TES/NO			Monthly
2	Fire register for last service (Annual & 6 monthly, DG vehicles)	Yes				Monthly
3	Fire Alarm System (break glass)	Yes				Weekly
4	Fire Suppression System	Yes				Monthly
5	Smoke detection system (Detectors)	Yes				Weekly
6	Smoke extraction system (vents / compressor)	Yes				3 monthly
7	Breathing apparatus	Yes				3 monthly
8	Flammable Liquids and Equipment	Yes				
9	Gas cylinder storage	Yes				Yearly
10	Sprinkler system					Weekly
11	Sprinkler System Booster Pump	Yes				Weekly
12	Emergency exits with suitable locking devices	Yes				Weekly
13	Evacuation alarm	Yes				
	Lightning conductors	Yes				Monthly
14		Yes				2 yearly
15	Lightning Pre warning systems First Aid Equipment	Yes				Yearly
16		Yes				Weekly
17	Delivery/company vehicles – daily inspections	Yes				Daily
18	Delivery / company vehicles – licence verification	Yes				2 yearly
19	Driven machinery	Yes				Daily
20	Machine guarding	Yes				Daily
21	Standby electrical generator	Yes				Weekly
22	Uninterrupted power supply (UPS)	Yes				Weekly
23	Battery charging area	Yes				Daily
24	Eye wash station (Hazardous chemical area)	Yes				Monthly
25	Pressure vessels	Yes				Monthly
26	Gas welding and cutting equipment	Yes				Weekly
27	Electrical welding equipment	Yes				Weekly
28	Fume hoods	Yes				Weekly
29	Air conditioning	Yes				3 monthly
30	Portable electrical equipment	Yes				Monthly
31	Ladders / stairways	Yes				Monthly
32	Safety Life lines	Yes				Yearly
33	Anchor bolts	Yes				Yearly
34	Safety Harness	Yes				Daily
35	Notification of Construction work (Annex 2) submitted to DEL	Yes				Monthly
36	Hand tools	Yes				Monthly
37	Explosive power tools	Yes				Monthly
38	Jack hammer	Yes				Monthly
39	Bench grinders	Yes				Monthly
40	Compactor	Yes				Monthly
41	Roller Shutter Doors	Yes				Monthly
42	Dock Levellers	Yes				Monthly
43	Weight Scale calibration	Yes				6 Monthly
44	Xray Machines / Laser cutting Machines	Yes				2 Yearly
45	Lithium Iron batteries	Yes				Monthly
46	Limit switches / lockout	Yes				Daily
47	Electrical sub stations / Transformers heat test / Oil Inspection	Yes				3 monthly
48	Distribution board / earth leakage / polarity checks / lock out	Yes				Monthly
49	Work Permit system	Yes				2 yearly
50	Effluent discharge Permit from local Authority	Yes				2 yearly
51	Toilets, change rooms	Yes				Weekly
52	Canteen kitchen hygiene	Yes				Weekly
53	Pest control bait stations	Yes				Weekly
54	Hygiene Survey	Yes				2 yearly

