



MONTHLY HAND TOOL INSPECTION

SITE:
DATE:

TOOL NUMBER

1	Hammers fitted with shock absorbing handle.													
2	No mushroomed chisels, wedges, drifts, slogging spanners.													
3	Tool not visually deformed													
4	Chisels, spades, picks, etc sharp and true.													
5	Handles on spades, forks, picks, hammers, etc undamaged.													
6	Toolboxes clean and tidy.													
7	Storage area for tools clean and tidy.													
8	Tools stored in racks or bins protected from theft													
9	Teeth on the saws sharp and straight.													
10	Are the right tools used for the right task?													
11	Are the right PPE worn by the employees when using the tools.													
12	Other													
13	Other													
14	Other													
15	Other													
16	Other													

INSPECTED BY:

CONSTRUCTION SUPERVISOR:

SIGNATURE:

SIGNATURE: