國立暨南國際大學 107學年度第 1 學期 高壓氣體容器或鋼瓶及管路 作業檢點紀錄表**(每日/作業前)**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 負責單位 | | | | ○○系 | 實驗場所名稱(編號) | | | | | | | ○○實驗室(TB611) | | | | | | | | | | 危害通識標示(GHS) | | | | | | | | | 有 無 | | | | | | | | | |
| 類別 | | | | 容器 鋼瓶 | 氣體名稱 | | | | | | |  | | | | | | | | | | 安全資料表(SDS) | | | | | | | | | 有，需三年更新 無 | | | | | | | | | |
| 項次 | 檢 點 項 目 | | | | 檢查結果( 年 月) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | | 8 | 9 | 10 | 11 | 12 | 13 | 14 | | 15 | | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | | 24 | | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
| 1 | 鋼瓶 | | 是否固定 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 2 | 內容物與標示名稱是否相符 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 3 | 空(實)瓶是否直立放好無橫放情形 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 4 | 是否放置適當位置，不可妨礙照明、機械操作、通道出入及消防設備使用 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 5 | 調壓器、柱塞是否正常、無洩漏 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 6 | 壓力表、流量計是否完整無損壞或洩漏 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 7 | 輸送管是否完整無損壞、腐蝕及洩漏情形 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 8 | 皮管是否有管夾固定 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 9 | 高壓皮管是否完整無損壞或龜裂 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 10 | 使用完畢是否確實關閉開關 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 11 | 移動時，護蓋是否旋緊並以直立移動 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 12 | 是否超過使用年限 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 13 | 鋼瓶存放場所 | | 照明是否良好 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 14 | 是否置於通風良好、陰涼非陽光直射處 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 15 | 是否掛有標示牌(嚴禁煙火、高壓氣體放置處) | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 16 | 空瓶、實瓶是否分開放置 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 17 | 備用氣體鋼瓶（實瓶）儲放情況是否良好(應有護蓋) | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 18 | 二公尺範圍內是否無易燃物品 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 19 | 是否設有消防設備 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 20 | 可燃性、有毒及氧氣之鋼瓶是否分開存放 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 21 | 其他 | | 管線是否標示內容氣體品名及流向 | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 狀況及處理情形 | | | | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 檢查人員(每日或作業前) | | | | |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |  | |  | |  |  |  |  |  |  |  |
| 注意事項 | | 1.依職業安全衛生管理辦法第62.65條實施，檢查週期：操作人員**每日或作業前進行檢點**。  2.檢點結果應詳實紀錄，檢點結果正常打()，異常打( )，無此項目打(＊或／)，異常時，請**立即報修**；無異常時，於每月底送工作場所負責人簽章即可。  3. 本表單**完成後請自行保存三年，以供備查。** | | | | | | | | | | | | | | | | | | 單位承辦人 | | | | | | | | | | | | |  | | | | | | | |
| 工作場所負責人(單位主管) | | | | | | | | | | | | |  | | | | | | | |