



Fall Protection Inspection Form (Self Retracting Lifeline)

Manufacturer:	Date of Manufacture:
Serial #	Model #
Inspection Date:	In-Service Date:
Name of User (Authorized Person):	
Name of Competent Person:	

LABELS & MARKINGS	PASS	FAIL	NOTE
Label (legible/intact)			
Appropriate (ANSI/OSHA) Markings			
Date of First Use			
Inspections Current / Up to Date			

HOUSING & CONNECTORS	PASS	FAIL	NOTE
Cover/Shrink Tube (Don't Cut or Remove)			
Nuts / Bolts / Hook Body / Rivets / Screws			
Evidence of Damage (Dents, Cracks, Rust)			
Connector (Self Closing & Locking)			
Pitting / Nicks / Corrosion			

LIFELINE (WEB or CABLE)	PASS	FAIL	NOTE
Entire Length Retracts Smoothly			
Test Braking / Locking Function			
Termination (Stitch, Splice or Swage)			
Excessive Wear / Kinks			
Cuts / Fraying / Broken Stitching			
Cable Separating / Bird-Caging			
Excessive Wear			

SHOCK PACK (if present)	PASS	FAIL	NOTE
Cover / Shrink Tube (Don't cut or remove)			
Damage / Fraying / Broken Stitching			
Impact Indicator (Signs of Deployment)			

ADDITIONAL NOTES: