



**GO DIGITAL TODAY**  
Convert your paper  
checklists into digital forms

*Scan this QR code to use this  
paper checklist on your  
smartphone or tablet. Visit  
[www.iauditor.com](http://www.iauditor.com)*



## Working Environment

### Working Environment

Is it too hot?

☐ Yes ☐ No ☐ N/A

Is it too cold?

☐ Yes ☐ No ☐ N/A

Is there adequate ventilation?

☐ Yes ☐ No ☐ N/A

Is the lighting level adequate?

☐ Yes ☐ No ☐ N/A

REFERENCE: A well lighted workplace.

[This is an example of how you can use iAuditor to include best practice reference images in your templates to assist with inspections]

Is the environment dusty?

☐ Yes ☐ No ☐ N/A

Health and Safety notice displayed?

☐ Yes ☐ No ☐ N/A

---

Is the work environment noisy?

☐ Yes ☐ No ☐ N/A

---

### Housekeeping

---

#### Housekeeping

---

Inspection area tidy, clean and well organised?

☐ Yes ☐ No ☐ N/A

---

Access ways obstructed?

☐ Yes ☐ No ☐ N/A

---

Tripping hazards (including floor finishes)?

☐ Yes ☐ No ☐ N/A

---

All electrical cleaning equipment tested?

☐ Yes ☐ No ☐ N/A

---

All equipment stored under correct conditions?

☐ Yes ☐ No ☐ N/A

---

Rubbish disposal area clean and clear?

☐ Yes ☐ No ☐ N/A

---

Sharps removal procedure in place?

☐ Yes    ☐ No    ☐ N/A

---

No smoking signs in position?

☐ Yes    ☐ No    ☐ N/A

---

## Material storage

---

### Material Storage

---

Correctly stored?

☐ Yes    ☐ No    ☐ N/A

---

Shelving overloaded/stacked incorrectly?

☐ Yes    ☐ No    ☐ N/A

---

Shelving in good condition?

☐ Yes    ☐ No    ☐ N/A

---

Suitable access to high level storage?

☐ Yes    ☐ No    ☐ N/A

---

## Electrical

---

### Electrical

---

Is all portable equipment tested and labeled?

☐ Yes    ☐ No    ☐ N/A

---

Leads undamaged?

☐ Yes    ☐ No    ☐ N/A

---

Trailing leads?

☐ Safe    ☐ At Risk    ☐ N/A

---

Sockets overloaded?

☐ Yes    ☐ No    ☐ N/A

---

## Ladders/step ladders

---

### Ladders/Step Ladders

---

Procedure for inspection/records?

☐ Yes    ☐ No    ☐ N/A

---

Equipment in good condition?

☐ Yes    ☐ No    ☐ N/A

---

Company I.D./marking?

☐ Yes    ☐ No    ☐ N/A

---

Procedure for erection?

☐ Yes    ☐ No    ☐ N/A

---

## Kitchen areas

---

### Kitchen Areas

---

Safety notices in place?

☐ Yes

☐ No

☐ N/A

---

Cleaning schedule in place?

☐ Yes

☐ No

☐ N/A

---

Microwave sticker in place?

☐ Yes

☐ No

☐ N/A

---

Spillage procedure in place?

☐ Yes

☐ No

☐ N/A

---

## Toilet Facilities

---

### Toilet Facilities

---

Toilet area clean and tidy?

☐ Yes ☐ No ☐ N/A

---

Adequate soap?

☐ Yes ☐ No ☐ N/A

---

Hand towels/drying facilities in place and working?

☐ Yes ☐ No ☐ N/A

---

Adequate toilet paper?

☐ Yes ☐ No ☐ N/A

---

Sanitary disposal in place?

☐ Yes ☐ No ☐ N/A

---

Sanitary vending in place?

☐ Yes ☐ No ☐ N/A

---

Walls and surfaces clean?

☐ Yes ☐ No ☐ N/A

---



## First Aid

---

### First Aid

---

Name of appointed person displayed and dated?

☐ Yes    ☐ No    ☐ N/A

---

Telephone number for appointed person displayed?

☐ Yes    ☐ No    ☐ N/A

---

Emergency telephone number displayed?

☐ Yes    ☐ No    ☐ N/A

---

Accident reporting procedure in place?

☐ Yes    ☐ No    ☐ N/A

---

## Fire Precautions

---

### Fire Precaution

---

Routes clear of obstructions?

☐ Yes ☐ No ☐ N/A

---

Fire doors easily opened?

☐ Yes ☐ No ☐ N/A

---

Fire doors propped open?

☐ Yes ☐ No ☐ N/A

---

Emergency lighting adequate?

☐ Yes ☐ No ☐ N/A

---

Evacuation routes clearly signed?

☐ Yes ☐ No ☐ N/A

---

Extinguishers in place?

☐ Yes ☐ No ☐ N/A

---

Extinguishers in date?

☐ Yes ☐ No ☐ N/A

---

Correct type?

☐ Yes ☐ No ☐ N/A

---

Identification label in place?

☐ Yes    ☐ No    ☐ N/A

---

Hose reels in test?

☐ Yes    ☐ No    ☐ N/A

---

Smoke/heat detectors checked?

☐ Yes    ☐ No    ☐ N/A

---

## Fire instructions

---

### Fire Instructions

---

Posted up?

☐ Yes ☐ No ☐ N/A

---

Free from damage?

☐ Yes ☐ No ☐ N/A

---

Current and up to date?

☐ Yes ☐ No ☐ N/A

---

Weekly test undertaken?

☐ Yes ☐ No ☐ N/A

---

Annual evacuation undertaken?

☐ Yes ☐ No ☐ N/A

---

Evacuation chairs in place?

☐ Yes ☐ No ☐ N/A

---

Fire risk assessment completed?

☐ Yes ☐ No ☐ N/A

---

**COSHH (control of substances hazardous to health)**

---

**COSHH**

---

COSHH assessments in place?

☐ Yes    ☐ No    ☐ N/A

Exposure adequately controlled?

☐ Yes    ☐ No    ☐ N/A

Data sheet information available?

☐ Yes    ☐ No    ☐ N/A

Spillage procedure in place?

☐ Yes    ☐ No    ☐ N/A

Correctly stored?

☐ Yes    ☐ No    ☐ N/A

Correctly disposed of?

☐ Yes    ☐ No    ☐ N/A

Disposal of hazardous waste in place?

☐ Yes    ☐ No    ☐ N/A

Flammable liquids correctly stored/signed?

☐ Yes    ☐ No    ☐ N/A

## Machinery

---

### Machinery

---

All guards in place?

☐ Yes    ☐ No    ☐ N/A

---

Kept clean of rubbish?

☐ Yes    ☐ No    ☐ N/A

---

Emergency stop buttons fitted?

☐ Yes    ☐ No    ☐ N/A

---

Safety warning notices in place?

☐ Yes    ☐ No    ☐ N/A

---

Risk assessment in place?

☐ Yes    ☐ No    ☐ N/A

---

## PPE (personal protective equipment)

---

### PPE

---

Correct type for hazard identified?

☐ Yes    ☐ No    ☐ N/A

---

Good condition?

☐ Yes    ☐ No    ☐ N/A

---

Correctly stored?

☐ Yes    ☐ No    ☐ N/A

---

## Eyewash Bottles/Cylinders

---

### Eyewash Bottles/Cylinders

---

Full?

☐ Yes

☐ No

☐ N/A

---

In date?

☐ Yes

☐ No

☐ N/A

---

Correctly stored/fixed?

☐ Yes

☐ No

☐ N/A

---

Correct pressure?

☐ Yes

☐ No

☐ N/A

---



## Outside areas

---

### Outside Areas

---

Roadways in good condition?

☐ Yes ☐ No ☐ N/A

---

Pavements in good condition?

☐ Yes ☐ No ☐ N/A

---

Access ramps in place?

☐ Yes ☐ No ☐ N/A

---

Steps clear of obstructions and clean?

☐ Yes ☐ No ☐ N/A

---

Cycle racks being used?

☐ Yes ☐ No ☐ N/A

---

Hand rails in good condition?

☐ Yes ☐ No ☐ N/A

---

All lights working?

☐ Yes ☐ No ☐ N/A

---

All notices in place?

☐ Yes ☐ No ☐ N/A

---

Completion

Completion

Recommendations

Enter text

Full Name and Signature of the Inspector

