San Diego State University
Safety Survey Checklist

This form is to be used for all workshop area inspections in addition to the detailed Hazard Assessment Checklist located in the workshop-specific Injury and Illness Prevention Program (IIPP).

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<tr>
<th>Inspection Date</th>
<th>Department</th>
<th>Shop</th>
<th>Building/Room</th>
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Surveyor Name ______________________ Phone Ext __________

Report Type: Quarterly ___ Biannual ___ Annual ___ Incident Follow Up___

The Safety Survey Checklist Instructions and Information-Workshop Area form must be used while completing this safety survey. Please indicate if the items listed below are in compliance. A “Yes” or “N/A” response indicates compliance. Responsibility for resolving non-compliance items is indicated in parenthesis.

Items marked as non-compliant below are in violation of specific sections of the California Health and Safety Code, California Code of Regulations: Title 8 and Title 22, or the Uniform Fire Code. All items marked as non-compliant must be corrected. Please contact EH&S @594-6778 if you have any questions.

### GENERAL SAFETY

1. Employee health and safety information is posted. *(Dept, EHS)*
2. Clearance is maintained for walkways. *(Shop)*
3. All areas have adequate lighting. *(Shop)*
4. First aid kits are available and stocked. *(Dept)*
5. Storage racks and cabinets are seismically restrained. *(Shop)*
6. Employees are aware of health and safety requirements and policies. *(Dept)*
7. Stairways are maintained in a safe condition. *(Shop)*

List Comments, Reasons for Non-Compliance and Date of Resolution:

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

### FIRE AND LIFE SAFETY

1. Exits are clearly marked. *(Shop)*
2. All emergency equipment is easily accessible. *(Shop)*
3. Fire doors are unobstructed and closed. *(Shop)*
4. Fire extinguishers are available, certified annually, and inspected monthly. *(Shop)*
5. Fire alarm audio visual devices are easily seen and free of obstruction. *(Shop)*
6. No smoking policy is enforced. *(Dept)*
7. Employees are trained in emergency evacuation and how to report a fire or other emergency. *(Dept)*

List Comments, Reasons for Non-Compliance and Date of Resolution:

___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

### ELECTRICAL SAFETY

1. Electrical components are in safe working condition. *(Shop)*
2. Electrical cords are used and secured appropriately. *(Shop)*
3. Electrical and circuit breaker panels have a minimum of 36" unobstructed access. *(Shop)*

List Comments, Reasons for Non-Compliance and Date of Resolution:

___________________________________________________________________________________
___________________________________________________________________________________

### GENERAL WORKSHOP AREA SAFETY

6/2006
1. Machines, equipment, and work area are in good condition. *(Shop)* | Yes | No | N/A
2. Lockout/Tagout procedures are followed. *(Shop)* | Yes | No | N/A
3. Employees are trained and safety topics are reviewed. *(Shop)* | Yes | No | N/A
4. Proper personal protective equipment is available and used. *(Shop)* | Yes | No | N/A
5. Local exhaust/ventilation is provided as required. *(Shop)* | Yes | No | N/A
6. Machine guards are in place and required warnings are posted. *(Shop)* | Yes | No | N/A
7. Hazard assessments are performed. *(Shop)* | Yes | No | N/A

List Comments, Reasons for Non-Compliance and Date of Resolution:

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**CHEMICAL SAFETY**

1. All chemical bottles and containers are clearly labeled and closed. *(Shop)* | Yes | No | N/A
2. Hazardous materials are stored in adequate containers with compatible chemicals. *(Shop)* | Yes | No | N/A
3. Acid is stored below eye level and in secondary containment. *(Shop)* | Yes | No | N/A
4. A chemical spill kit is accessible and contents are intact. *(Shop)* | Yes | No | N/A
5. Appropriate personal protective equipment is available (e.g., safety glasses and gloves). *(Shop)* | Yes | No | N/A
6. Emergency eyewash & safety showers are present, accessible, and in good working condition. *(Shop)* | Yes | No | N/A
7. Food or beverage containers are not used to store chemicals. *(Shop)* | Yes | No | N/A
8. Sinks have berms if there is chemical storage nearby. *(Shop)* | Yes | No | N/A
9. MSDS’s are accessible. *(Shop)* | Yes | No | N/A
10. Compressed gas cylinders are secured together and stored properly. *(Shop)* | Yes | No | N/A

List Comments, Reasons for Non-Compliance and Date of Resolution:

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**HAZARDOUS WASTE**

1. Waste containers are adequate, closed, properly labeled, and in good condition. *(Shop)* | Yes | No | N/A
2. Waste containers are not held longer than 9 months. *(Shop)* | Yes | No | N/A
3. Hazardous waste labels are completed including date of first use. *(Shop)* | Yes | No | N/A
4. Food or beverage containers are not used to store hazardous waste. *(Shop)* | Yes | No | N/A
5. All spills are cleaned up in a timely manner. *(Shop)* | Yes | No | N/A
6. Empty containers are marked “empty” and given to EH&S for pick-up. *(Shop)* | Yes | No | N/A
7. Boxes and/or containers do not have overflow, i.e. lids can be closed. *(Shop)* | Yes | No | N/A
8. Chemicals are not stored in the sink. *(Shop)* | Yes | No | N/A
9. Incompatible chemical waste is not stored together, without secondary containment. *(Shop)* | Yes | No | N/A
10. Unauthorized treatment of chemicals for disposal, i.e. neutralization, filtering, chemical separation, dilution, etc. is not performed. *(Shop)* | Yes | No | N/A

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*Please contact EH&S @46778 for hazardous waste labels and to request hazardous waste disposal*