COMPANY NAME

PPE Inspection Sheet

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Hard Hat | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Evaluate for fit |  |  |  |  |  |
|  | Damage to shell: cracks, dent and abrasions |  |  |  |  |  |
|  | Damage to liner: rips, tears or thermal damage |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | Suspension system |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Action Taken: |  | | | | | |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Footwear | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Evaluate for fit |  |  |  |  |  |
|  | Soiling |  |  |  |  |  |
|  | Rips, tears, cuts |  |  |  |  |  |
|  | Loss of water resistance |  |  |  |  |  |
|  | Closure system damage |  |  |  |  |  |
|  | Damage or deformed steel toe, midsole or shank |  |  |  |  |  |
|  | Seam integrity and condition of liner |  |  |  |  |  |
|  | Heel and excessive trend wear |  |  |  |  |  |
|  | Closure system damage and functionality |  |  |  |  |  |
| Action Taken: |  | | | | | |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Vest | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Evaluate for fit |  |  |  |  |  |
|  | Soiling |  |  |  |  |  |
|  | Rips, tears, cuts |  |  |  |  |  |
|  | Damages and missing hardware |  |  |  |  |  |
|  | Thermal damage such as charring, burn holes, or melting in layer |  |  |  |  |  |
|  | Broken or missing stitches |  |  |  |  |  |
|  | Reflective trim: attached, reflectivity, damage |  |  |  |  |  |
|  | Liner attachment system |  |  |  |  |  |
|  | Closure system functionality |  |  |  |  |  |
| Action Taken: |  | | | | | |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Gloves | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Evaluate for fit |  |  |  |  |  |
|  | Soiling |  |  |  |  |  |
|  | Contamination |  |  |  |  |  |
|  | Rips, tears, cuts, or thermal damage |  |  |  |  |  |
|  | Inverted liner |  |  |  |  |  |
|  | Shrinkage |  |  |  |  |  |
|  | Loss of elasticity |  |  |  |  |  |
| Action Taken: |  | | | | | |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Eyewear | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Damage or missing components to face-shield or goggle system |  |  |  |  |  |
|  | Face shield/goggle |  |  |  |  |  |
| Action Taken: |  | | | | | |
| Inspection “√” Condition; In need of (Mark with an “X”) | | | | | | |
| Respirator | Proper fit (refer to standard) | Pass | Fail | Clean | Replace | Repair |
|  | Damage or missing components |  |  |  |  |  |
|  | Respirator functionality |  |  |  |  |  |
|  | Filters |  |  |  |  |  |
| Action Taken: |  |  |  |  |  |  |

Comments:

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Inspected by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_