

# Carrus Office Quarterly Site Inspection Checklist

Use this checklist to assist in completing the Monthly Site Inspection of an office

Check each item and tick the appropriate box. Make a note of any work required to rectify and issues and forward to the HSO.

Complete  $\frac{1}{4}$  quarterly

Site: \_\_\_\_\_

Date Checked: \_\_\_\_\_

	Yes	No
Is the Office Clean and Tidy		
Are all lights working		
First Aid Boxes available and stocked, has any contents expired		
Are there any hazard in the office (if yes explain under faults)		
Does the office have PPE gear for use on site		
Are all electric appliances in good, safe working order		
Are stairs, decking and handrails safe i.e. not slippery, even surfaces, no nails protruding		
All door mats are lying flat i.e not curled so as someone might trip		
Are all heating devices free from any obstructions.		
Adequate communications are available		

FAULTS:

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Action Taken to have faults rectified:

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Date to be rectified by: ..... Signed: .....

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