**Safety Inspection Checklist – Food Processor**

A picture containing logo

Description automatically generated

**Building Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**

**Inspected by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

| Description | Yes | No | Comments | Correction Date |
| --- | --- | --- | --- | --- |
| **Programs and Posters** |  |  |  |  |
| Injury and Illness Prevention Program (IIPP) or safety program? |  |  |  |  |
| Hazard Communication Program (HazCom)? |  |  |  |  |
| Lock Out Tag Out Program (LOTO)? |  |  |  |  |
| Emergency Action Program (EAP)? |  |  |  |  |
| Exit routes and key response people and phone numbers posted? |  |  |  |  |
| Report of unsafe conditions form available to employees? |  |  |  |  |
| Local clinic with Medical Provider Network (MPN) posted? |  |  |  |  |
| Federal and State All-in-One poster for the current year? |  |  |  |  |
| Cal/OSHA Log 300A summary for previous year (post from February 1 until April 30)? |  |  |  |  |
| Are Certificates of Insurance current and on file for contractors, service companies, and tenants? |  |  |  |  |
| **Office Areas** |  |  |  |  |
| Are desk chairs adjustable, i.e., seat, seatback, and armrest height? |  |  |  |  |
| Are frequent phone users provided with headsets? |  |  |  |  |
| Is office furniture set up ergonomically for the user – wrists in a neutral position? |  |  |  |  |
| Are power strips not daisy-chained (connected)? |  |  |  |  |
| **General Emergency Preparedness/Response** |  |  |  |  |
| Are first aid kits in place and adequately stocked with bandages (no meds such as aspirin or Tylenol)? |  |  |  |  |
| Has a fire, earthquake, or other emergency response drill been conducted in the past 12 months? |  |  |  |  |
| Are earthquake response supplies available? |  |  |  |  |
| **Life Safety** |  |  |  |  |
| Are exit corridors, doorways, and stairs unobstructed? |  |  |  |  |
| Is panic hardware in place for exit doors and in working condition? |  |  |  |  |
| Are exits marked and illuminated? |  |  |  |  |
| Is the emergency lighting system in place and working? |  |  |  |  |
| “Not An Exit” signs posted or doors clearly labeled? |  |  |  |  |
| **Housekeeping** |  |  |  |  |
| Are walking surfaces free of tripping and slipping hazards? No excess water? |  |  |  |  |
| Mats and signage available and used for wet floor situations? Are wet floors addressed immediately? |  |  |  |  |
| **Electrical** |  |  |  |  |
| Are electrical cords in good condition and only for temporary use (less than 90 days)? |  |  |  |  |
| Where work with portable tools and/or electrical cords in wet areas, are ground fault circuit interrupters (GFCI) used? |  |  |  |  |
| Do electrical junction, switch, and receptacle boxes have covers that are tightly closed? |  |  |  |  |
| Are outlets in good condition and with no missing covers? |  |  |  |  |
| Are switches clearly marked with their purpose if not obvious? |  |  |  |  |
| Are circuit breakers labeled with their functions and all covers complete (no blanks) and in place? |  |  |  |  |
| Is there a clear 36 inches access around all electrical panels? |  |  |  |  |
| **Fire Safety** |  |  |  |  |
| Is there at least an 18 inches clearance between the fire sprinkler heads, storage, and shelving? |  |  |  |  |
| Portable fire extinguishers provided throughout and clearly marked? |  |  |  |  |
| Portable fire extinguishers recharged at least annually, tagged, signed off monthly? Gauges show them as fully charged? |  |  |  |  |
| Have employees been trained on the use of portable fire extinguishers within the past year? |  |  |  |  |
| At least one employee on each shift can shut off gas and electricity, or can call building engineer? |  |  |  |  |
| Gas shut off tool mounted and labeled? |  |  |  |  |
| **Food Production** |  |  |  |  |
| Is machinery secured and guarded? |  |  |  |  |
| Is machinery locked out when cleaning, unjamming, or servicing? |  |  |  |  |
| Are proper tools and equipment provided? |  |  |  |  |
| Is proper personal protective equipment (PPE) provided and used – gloves, safety glasses, goggles, face shields, slip-resistant footwear, etc.? |  |  |  |  |
| Floor clean and free of spillage? Clear walkways? |  |  |  |  |
| Knives sharpened and properly stored? |  |  |  |  |
| Ansul-type system serviced within 6 months? |  |  |  |  |
| **Conveyor Systems** |  |  |  |  |
| Emergency controls and warning alarm operable? |  |  |  |  |
| Employees obey rules for start and stop? |  |  |  |  |
| Conveyor drive mechanisms fully enclosed? |  |  |  |  |
| Is overhead protection from conveyors in place? |  |  |  |  |
| **Fall Prevention** |  |  |  |  |
| Ladders inspected regularly and employees trained in their use? |  |  |  |  |
| Employees follow 3 points of contact rule on ladders? |  |  |  |  |
| Stepladders available to retrieve items from shelves above shoulder height? |  |  |  |  |
| Employees wear proper footwear? |  |  |  |  |
| Guardrails and toe boards (mezzanine floor) adequate, in place and/or secure? |  |  |  |  |
| Floor openings covered and guarded? |  |  |  |  |
| **Chemical Safety** |  |  |  |  |
| Safety Data Sheets (SDS) available and accessible to employees for all hazardous chemicals? |  |  |  |  |
| All chemical containers properly labeled and stored? |  |  |  |  |
| Proper personal protective equipment worn when handling chemicals? |  |  |  |  |
| Eyewash stations provide 15 minutes running water, properly maintained, and kept free of obstructions? |  |  |  |  |
| **Back Safety** |  |  |  |  |
| Lifting aides such as carts, hand trucks, dollies, etc. available to transport heavy materials? |  |  |  |  |
| Employees get help if they have to lift heavy items? |  |  |  |  |
| Repetitive bending and/or reaching below knuckle height and above shoulder height not required? |  |  |  |  |
| Repetitive twisting of trunk is not required? |  |  |  |  |
| **Lift Trucks** |  |  |  |  |
| Lift truck inspection completed by the assigned operator prior to starting shift? |  |  |  |  |
| Operated by qualified, competent, authorized person? |  |  |  |  |
| Operated in a safe manner? |  |  |  |  |
| Parked with hand brake set, forks lowered, mast forward, controls neutralized, engine off? |  |  |  |  |
| Overhead protection? |  |  |  |  |
| Marked for load capacity? |  |  |  |  |
| Excess fumes, oil leaks, etc.? |  |  |  |  |
| Batteries or compressed gas cylinders safely stored? |  |  |  |  |
| Drivers obey speed limits, signs, and traffic patterns? |  |  |  |  |
| Is propane container for industrial tractor and/or lift truck exchanged outdoors or in areas well ventilated to the outdoors and remote from any source of ignition? |  |  |  |  |
| Lift people only in proper cage with handrails and attached to forklift with chains? |  |  |  |  |
| Order pickers wear body belts and lanyards while on platforms of elevating order pickers? |  |  |  |  |
| **Loading Dock** |  |  |  |  |
| Overhead doors appear to be in good condition? |  |  |  |  |
| Freight stacked neatly in and/or on vehicle? |  |  |  |  |
| Vehicles secured against accidental movement, i.e., wheel chocks, restraining devices, etc.? |  |  |  |  |
| Dock plates in good repair and anchored when in use? |  |  |  |  |
| Dock bumpers secure and in good condition? |  |  |  |  |
| Condition of vehicles and/or trailers (interiors free of hazards or damage, doors in good repair)? |  |  |  |  |
| **Storage Areas** |  |  |  |  |
| Racks and/or shelving in good repair and secured from falling? |  |  |  |  |
| Heavy items on lower shelves and not overloaded? |  |  |  |  |
| Materials stacked properly? |  |  |  |  |
| **Cold Storage** |  |  |  |  |
| Floors dry and clean (not slippery)? |  |  |  |  |
| Adequate lighting, light bulbs protected? |  |  |  |  |
| Doors fully operable and emergency release inside to allow escape even when locked? |  |  |  |  |
| Proper temperature – below 41 degrees? |  |  |  |  |
| **Confined Space** |  |  |  |  |
| Silos, tanks, or other confined spaces clearly labeled – “Danger Permit-Required Confined Space, Do Not Enter” |  |  |  |  |
| Confined spaces secured from unauthorized entry? |  |  |  |  |
| Employees trained to identify and not enter? |  |  |  |  |
| **Parking Areas** |  |  |  |  |
| Adequate lighting? |  |  |  |  |
| Wheel stops and/or speed bumps secured and/or painted a contrasting color? |  |  |  |  |
| Gas meters and electrical panels protected to prevent damage from vehicles, i.e., concrete posts? |  |  |  |  |
| Surfaces free of potholes and uneven surfaces? |  |  |  |  |
| Garbage area clean – no broken glass or slippery liquids? |  |  |  |  |
| Dumpster lids kept closed and wheels locked? |  |  |  |  |
| Employees get help with full trash cans? |  |  |  |  |
| **Security** |  |  |  |  |
| Are all exterior doors closed and locked at night from the inside? |  |  |  |  |
| Is the outside and inside well lit at night? |  |  |  |  |
| If there is a security alarm or key card system, has it been tested and/or reviewed in the past month for integrity? |  |  |  |  |
| Are guest sign-in, badge, and escort systems in place and being used? |  |  |  |  |
| Are the receptionist and other designated people prepared to handle bomb, assault, or other physical threat situations? |  |  |  |  |
| Are timed devices (lighting, alarm systems, etc.) up to date with standard and daylight savings time? |  |  |  |  |

**Are there any facilities or equipment issues in need of repair or attention not noted above?**

**Additional Comments:**

*The information and suggestions in this form are presented as a guide. No results are guaranteed and no liability is assumed as to the information or safety suggestions presented. No assumption can be made that every acceptable safety procedure is stated. Abnormal, unusual, or particular circumstances may require different or additional procedures.*