

Carrus**Monthly Site Inspection Checklist**

Use this checklist to assist in completing a Monthly Site Inspection.

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 quarterly

Company: _____

Date Checked: _____

	Yes	No
Is the Site Clean and Tidy		
Is the Site Contained		
All site Warning Signs are Visible		
Site Hazard ID Boards are in place		
Are all people on site using PPE Gear		
Is there scaffolding in use		
Are people on roofs harnessed		
Equipment (Mobile Plant) has reversing warning signals		
Can you identify any hazards		
Hazard Controls are in place		
All accidents/incidents have been reported		
Are there port-a-loos on site (how many)		
First Aid Boxes available		
Fire extinguishers available		
Fresh water available		
Adequate communications are available		

Carrus

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FAULTS:

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Action Taken to have faults rectified:

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Date to be rectified by: Signed: