



SERVICE VEHICLE WEEKLY SAFETY INSPECTION CHECKLIST

SERVICE TECH: _____
 VAN #: _____
 PERSON PERFORMING INSPECTION: _____

DATE OF INSPECTION: _____
 DATE CORRECTIONS WILL BE COMPLETED BY: _____

Evaluation Summary: Acceptable, No Follow Up Needed Follow Up, Corrective Actions Needed

Instructions:
 EHS issues and conditions, both on this checklist and not on this checklist, should be corrected or eliminated as soon as possible. Please explain any "In Violation" response in the "Comments" section. Once inspection is completed, review findings with foreman. Foreman must list what actions they will take to correct all findings and come up with a date to have all corrections done by. This date must be listed above. All paperwork and follow up from findings must be reported back to the Safety Manager.

INSPECTION AREAS	OK	IN VIOLATION	N/A	INSPECTION AREAS	OK	IN VIOLATION	N/A
1. Visually inspect around van				8. Tanks: Refrigerant, Acetylene, Nitrogen, Oxygen			
-Fluid leaks?				-Are all tanks Tied off & stored in an upright position prior to transport?			
-Loose parts?				-Have all regulators been removed prior to transport?			
2. Check for damage				9. Inspect interior			
-Windshield & windows				-Is the interior lighting operational?			
-Exterior body				-Are the seats secure and in good condition?			
-Side mirrors				-Are seats and floor clean?			
-Wiper blades				-Are safety restraints present & operable?			
-Do all doors open, close & lock properly?				-Floor clear of loose items & debris?			
3. Check the tires				-Is there a secure spot for additional materials or tools needed at jobsite to be transported?			
-Uneven wear, cracks or damage?				10. Check equipment and safety items			
-Inflated properly?				-Dashboard indicator lights & gauges			
4. Check all exterior lights				-Horn			
-Headlights				-Windshield wipers & washer fluid			
-Tail lights				-Backup alarm			
-Brake lights				-Parking brake			
-Reverse lights				-Fire extinguisher - stocked & within service date			
-Turn signals				-First Aid kit - stocked and no outdated items			
-Emergency Flashers				-Insurance liability card in glove compartment?			
5. Ladders				-Are gloves, earplugs, safety glasses, hard hat, and other required ppe readily available to employees?			
-Any loose rungs?				-Do employees have appropriate equipment to protect themselves from falls when exposed?			
-Any broken pieces/parts?				-Is fall protection harnesses being inspected two times a year by designated company equipment inspector?			
-Are ladder racks in good condition?				-Is a loto kit stored in the van?			
-Are ladders tied off w/ proper tie down straps?				-Is the loto kit stocked with all necessary supplies?			
-Are tie down straps in good condition?				-Are all shelves secure to prevent tipping over?			
6. Ropes							
-Any ropes frayed?							
-Any ropes that need to be replaced?							
7. Power Tools							
-Using GFI & Circuit tester in the field?							

Comments/Corrective Action to be taken:

Corrective Actions to be completed by (Service Member Name) _____ by (Date): _____

OUR GOAL IS ZERO INJURIES IN THE WORKPLACE