

Scaffolding and Ladder Safety Audit Checklist

Site:

Auditor:

Date:

Scaffolding Safety

Checklist Item	Yes	No	N/A	Comments
Scaffold erected by qualified personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Scaffolding inspected before use and tagged?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Guardrails, midrails, and toeboards in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Access ladders provided and secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Platforms fully decked and free from gaps?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Scaffold stable and properly supported?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
No signs of damage or defects on components?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Ladder Safety

Checklist Item	Yes	No	N/A	Comments
Ladder inspected for defects before use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ladder positioned on stable and level surface?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ladder secured to prevent movement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Three-point contact maintained when climbing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Correct ladder type used for the task?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Area around ladder free from obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments & Notes

Enter additional observations, comments, or corrective actions here...

Auditor Signature: 

Date: 