

Assembly Line Safety Compliance Checklist

Inspector Name:

Inspection Date:

Assembly Line / Location:

Checklist

Item	Compliant	Non-compliant	Comments
All emergency stop buttons are accessible & functional	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Proper signage and floor markings are in place	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Machine guards are in position and undamaged	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Personal protective equipment (PPE) is used as required	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Work areas are free of slip, trip, or fall hazards	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
First Aid kits are available and fully stocked	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Electrical panels are clear and properly labeled	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Fire extinguishers are accessible and inspected	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Additional Notes / Observations

Inspector Signature:

Supervisor Signature: