

# Housekeeping Chemical Safety Checklist

Date

Area/Room

Inspected by

## Checklist

Checklist Item	Yes	No	Remarks
Chemicals clearly labeled with correct identification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Material Safety Data Sheets (MSDS) available for all chemicals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Chemicals stored in designated area/container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Personal Protective Equipment (PPE) available and in use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Spill kits and emergency procedures accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Chemicals not stored with incompatible substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Staff adequately trained in chemical safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Chemical containers in good condition (not leaking or damaged)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>