

WILCARE

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Monthly OHS Inspection

Note: This document must be completed by a qualified Safety Representative.

Representative:	
Date:	
Area of assessment:	
Responsible Manager:	

OBSERVATION	YES	NO	RESPONSIBLE PERSON	DEVIATION
1	Structure and Buildings (walls, plastering, ceiling boards, leaks etc)			
Area				
Priority				
2	Floors and balconies (clear of loose tiles and carpets and safe railings, etc)			
Area				
Priority				
3	Ventilation (air conditioners working and ventilation adequate, etc)			
Area				
Priority				
4	Lighting (bulbs and lights all working, etc)			
Area				
Priority				
5	Health & Hygiene facilities (toilets & kitchens clean and hygienic, etc)			
Area				
Priority				
6	Pollution (smoke)			
Area				
Priority				
7	Stacking and Storage (store rooms, filing clean and organised, etc)			
Area				
Priority				
8	Housekeeping inside building (general order, clear passage ways, clean environment)			
Area				
Priority				
9	Housekeeping in yard (weeding, general gardening, exit doors not obstructed)			
Area				
Priority				
10	Refuse and scrap bins (are clean and accumulating/health hazard)			
Area				
Priority				
11	General electrics (light switches, plugs, cables working and safe)			
Area				
Priority				
12	Stairs (not slippery, no loose tiles, hand railings in place and secure)			
Area				
Priority				
13	Ergonomics (broken chairs, computer screens, tidy desks, general....)			

