Safety representatives: inspection forms

NB

1 A copy of each completed form should be retained by the safety representative

2 A copy of each completed form should be given to the employer (or his/her representative)
Safety Representative: Inspection Form

Record that an inspection by a safety representative or representatives has taken place

Date of inspection

Time of inspection

Area of workplace inspected

Name(s) and signature(s) of safety representative(s) taking part in the inspection

Name(s) and signature(s) of employer (or his representative(s)) taking part in the inspection (if appropriate)

(This record does not imply that the conditions are safe and healthy or that the arrangements for welfare at work are satisfactory)

Record of receipt of form by the employer (or his representative)

Signature

Date