

Fall Protection Inspection Form: Anchors.

Manufacturer of equipment: _____
 Name of Competent Person: _____
 Name of Authorized Person: _____
 Name of Authorized Inspector: _____

Industry: _____

Date of Inspection: _____

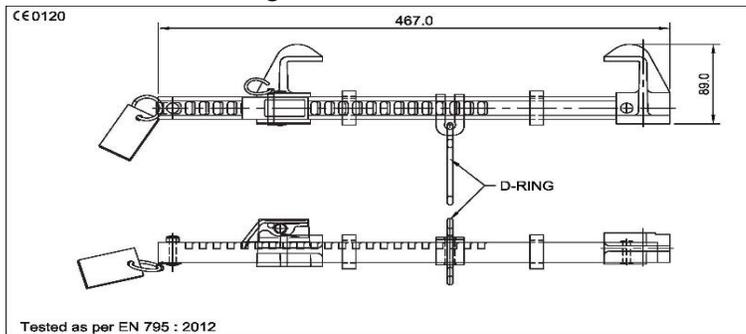
Date of Service: _____

1 Labels/Tags	Pass	Fail
<u>Missing</u>		
<u>Dates</u>		
<u>Illegible</u>		

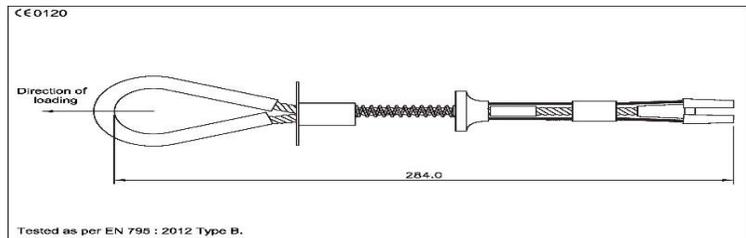
Inspection Details:

1. Labels/Tags
2. Webbing
3. Stitching
4. Hardware

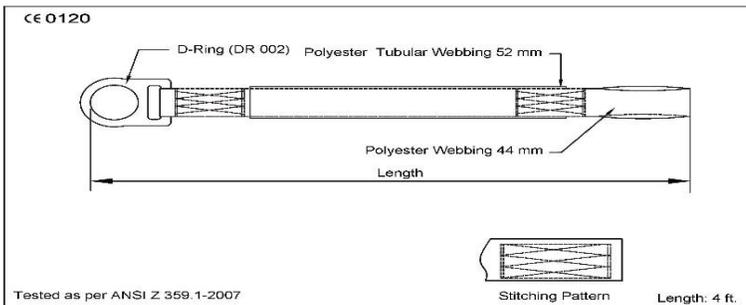
2 Webbing	Pass	Fail
<u>Excessive Wear</u>		
<u>Cuts, Burns, Holes</u>		
<u>Chemical residue</u>		
<u>Excessive UV Damage</u>		
<u>Other</u>		



3 Stitching	Pass	Fail
<u>Loose</u>		
<u>Missing</u>		
<u>Broken</u>		
<u>Other</u>		



4 Hardware	Pass	Fail
<u>Cracks, Burs</u>		
<u>Rust, Corrosion</u>		
<u>Functionality</u>		
<u>Missing Fasteners</u>		
<u>Deformed</u>		
<u>Slag, burns</u>		
<u>Springs</u>		



• Fall Protection • Competent Training • Netting • PPE

