Your Logo

EQUIPMENT INSPECTION FORM No. .....

INSPECTION DETAILS			
Company		**Site / location**	
Date		**Time**	
Inspected by		**Role / competence**	
Type of check	☐ Pre-use check ☐ Weekly check ☐ Interval inspection ☐ On hire ☐ Off hire ☐ After exceptional circumstances ☐ Other:		

EQUIPMENT REGISTER

List every item checked today: plant, power tools, machinery, portable electrical equipment. Use the item No. in the checks on the next pages.

No.	Item ID / serial No.	Type of equipment	Location	Owner / hire company	Last inspection	Next due	Result
1							☐ Pass ☐ Fail
2							☐ Pass ☐ Fail
3							☐ Pass ☐ Fail
4							☐ Pass ☐ Fail
5							☐ Pass ☐ Fail
6							☐ Pass ☐ Fail
7							☐ Pass ☐ Fail
8							☐ Pass ☐ Fail
9							☐ Pass ☐ Fail
10							☐ Pass ☐ Fail
11							☐ Pass ☐ Fail
12							☐ Pass ☐ Fail

WHICH RULES APPLY TO EACH ITEM?

Equipment	Main regulations	What is required
Plant, power tools, machinery and other work equipment	PUWER 1998, regulation 6	Inspection by a competent person at intervals set by your risk assessment; result kept until the next one
Lifting equipment and accessories	LOLER 1998	Thorough examination at least every 6 or 12 months, or under an examination scheme
Ladders, working platforms, harnesses	Work at Height Regulations 2005	Inspection where equipment deteriorates; evidence of the last inspection
Compressors, air receivers, steam systems	Pressure Systems Safety Regulations 2000	Examination under a written scheme of examination
Portable electrical equipment	Electricity at Work Regulations 1989	Maintained to prevent danger: user checks, formal visual inspections, testing where needed

POWER TOOLS AND HAND-HELD EQUIPMENT						
Mark each check: ✓ = OK × = defect (record it in the defects section) N/A = not applicable						
Check	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**
Casing undamaged, no cracks or missing screws						
Cable, plug or battery pack undamaged						
Switch and trigger lock working						
Guards, chuck key and side handle in place						
Blades, bits and discs secure, right type, not worn						
110 V tools on site: transformer and leads undamaged						

MACHINERY AND WORKSHOP EQUIPMENT						
Check	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**
Guards in place, secure and not bypassed						
Stop and emergency stop controls working						
Isolator identified and accessible						
Moving parts: no abnormal noise, vibration or wear						
No oil, air or hydraulic leaks						
Work area clear, lighting adequate						

MOBILE PLANT (DUMPERS, EXCAVATORS, ROLLERS, TELEHANDLERS)						
Check	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**	**Item No. .....**
Tyres or tracks: condition and pressure						
Brakes, steering and controls working						
Lights, horn, beacon and reversing alarm working						
Seat belt and rollover protection in place						
Fluid levels: fuel, oil, hydraulic, coolant						
Mirrors, cameras and windows clean, undamaged						
Attachments secure, locking pins fitted						

PORTABLE ELECTRICAL EQUIPMENT: USER CHECKS AND FORMAL VISUAL INSPECTION

User checks before use, formal visual inspections at set intervals by a trained person. Unplug before inspecting. Testing (PAT) where some faults can only be found by testing.

Check	Item No.	Item No.	Item No.	Item No.	Item No.	Item No. .....
Cable covering undamaged, no cuts or fraying						
Plug undamaged, no bent pins						
Cable outer sheath gripped where it enters plug and equipment						
No taped or non-standard joints in the cable						
Casing undamaged, no loose parts or screws						
No burn marks or staining (signs of overheating)						
Equipment suitable for where it is used (wet, dusty, outdoor)						
PAT test date and result (if tested)						

THOROUGH EXAMINATIONS AND WRITTEN SCHEMES

For lifting equipment (LOLER) and pressure systems (written scheme of examination): record the last report so it stays with the item.

No.	Item ID	Regime	Report ref.	Examined by	Next due
1		☐ LOLER ☐ PSSR			
2		☐ LOLER ☐ PSSR			
3		☐ LOLER ☐ PSSR			
4		☐ LOLER ☐ PSSR			

OTHER CHECKS FOR THIS EQUIPMENT

Add the checks recommended by the manufacturer or your risk assessment for a specific item.

Check	Item No.	Item No.	Item No.	Item No.	Item No.	Item No. .....
.....						
.....						
.....						
.....						
.....						
.....						

DEFECTS AND ACTIONS

Any defect that could be a danger: stop using the equipment, tag it "Do not use" and report it straight away. Do not use it again until it is repaired and checked.

No.	Item ID	Defect found (photo ref.)	Severity	Do not use	Reported to	Re-checked (date)
1			☐ Minor ☐ Serious	☐ Yes ☐ No		
2			☐ Minor ☐ Serious	☐ Yes ☐ No		
3			☐ Minor ☐ Serious	☐ Yes ☐ No		
4			☐ Minor ☐ Serious	☐ Yes ☐ No		
5			☐ Minor ☐ Serious	☐ Yes ☐ No		
6			☐ Minor ☐ Serious	☐ Yes ☐ No		
7			☐ Minor ☐ Serious	☐ Yes ☐ No		

HIRED EQUIPMENT AND EVIDENCE OF INSPECTION

Hire company		**Hire ref. / order No.**	
On hire: evidence of last inspection received (report, tag)	☐ Yes ☐ No ☐ N/A		
On hire: condition recorded with photos	☐ Yes ☐ No Photo refs:		
Off hire: condition recorded with photos	☐ Yes ☐ No Photo refs:		
Own equipment leaving the site: copy of report or tag sent	☐ Yes ☐ No ☐ N/A		

RESULT

Overall result	☐ All equipment safe to use ☐ Equipment tagged "Do not use" (see defects)		
Next inspection date		**Re-check needed**	☐ Yes ☐ No

COMMENTS

Signature of the inspector	Signature of the person in charge
Name: **Date:**	**Name:** **Date:**

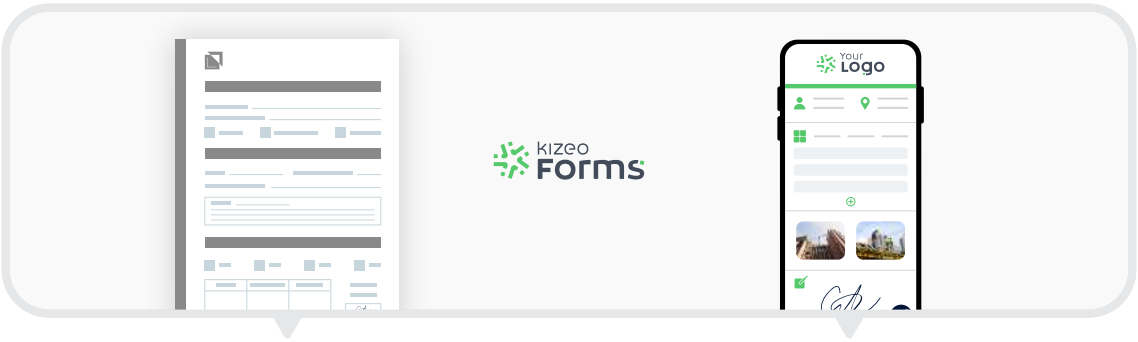
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