



Garage and Shop SAFETY CHECKLIST

Location _____ Name _____ Signature _____ Date _____

Personal Protective Equipment

| DESCRIPTION | YES | NO | N/A |
|---|-----|----|-----|
| Safety glasses and/or goggles available and being used? | | | |
| Protective eye wear use is specified in writing? | | | |
| Is noise protection used when loud work is done? | | | |
| Hand protection used/worn as required? | | | |
| Foot protection worn as required? | | | |
| Welding helmet, gloves, apron, and curtain available? | | | |
| Respirator or proper ventilation available? | | | |
| Supplies on hand for incidental chemical spills? | | | |

Emergency/OSHA Related Items

| DESCRIPTION | YES | NO | N/A |
|--|-----|----|-----|
| Emergency phone numbers and evacuation map posted? | | | |
| Emergency eyewash and/or shower units accessible? | | | |
| First aid kit and BBP kit available at work site? | | | |
| First aid trained competent person available? | | | |
| Fire extinguishers readily available (not blocked)? | | | |
| Fire extinguishers inspected monthly/yearly as needed? | | | |
| OSHA poster mounted in prominent location? | | | |
| Safety bulletin board contains up to date information? | | | |

Electrical Safety Issues

| DESCRIPTION | YES | NO | N/A |
|--|-----|----|-----|
| GFCI's used for all portable electrical hand tools? | | | |
| Extension cords rated for hard or extra hard usage? | | | |
| Certified or listed equipment is used per manufacturer's instructions? | | | |
| Electrical panels are labeled appropriately? | | | |
| Electrical panel knockouts are in place? | | | |