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Hand and Power Tool Safety

Inspection Details

Report #: _____

Location: _____

Inspection Date: _____

Inspector Name: _____

Vehicle Details

Vehicle # : _____

Vehicle Category : _____

Vehicle Name : _____

VIN #: _____

Meter Reading: _____

Model/Year: _____

Hand and Power Tool Safety

SN	Inspection Item	Note	Yes	No	NA
1	Write Comments or Remarks here:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Are tongue guards at the top of the wheel of bench, floor stand, and cylindrical grinders adjusted to the decreasing diameter of the wheel so that the gap is never more than one-fourth (1/4) of an inch?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Are the blades or bits of cutting tools and saws observed to not be damaged, cracked or excessively worn?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Are the tips of screwdrivers, chisels or other similar tools observed to show no excessive wear or breakage?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Are compressed air tools, such as portable compressors, hoses and nail guns kept in good repair, free of leaking grease, oil and accumulated foreign matter?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Are only Qualified Electrical Workers (as defined by OSHA and NFPA) allowed to install, connect and repair temporary wiring installations?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7	Are all wood handled tools, such as hammers and shovels observed to be free from cracks, splinters and other damage?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Are all Impact tools, such as drift pins, wedges, and chisels, observed to be free of mushroomed heads?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Are all hand tools inspected for damage before each use; and, if damaged, taken out of service and reported to a supervisor?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Is there a record of monthly inspections of all cord and plug-type tools and equipment used on the job site?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Is all temporary electrical power equipment exposed to the outdoors properly rated?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Are all portable cord and plug-type electrical tools powered from an GFCI equipped receptacle or used with a portable GFCI?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Are flexible cords and cables prohibited from being used as a substitute for fixed wiring of a structure; attached to building surfaces; concealed; run through holes in walls, ceilings, or floors?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Are flexible cords (I.e. "extension cords") used at the facility all equipped with grounded three-prong plugs or receptacles?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Are flexible cords (I.e. "extension cords") used at the facility properly rated and listed to support the load required?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	Are flexible cords free from damaged insulation, taped repairs, crimps, crushing and UV damage?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	Are only authorized and trained personnel permitted to use machine tools, corded electric power tools, pneumatic or powder-actuated equipment?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Note

Empty box for additional notes.

Overall Condition: _____
Vehicle Safe to Use: _____
Maintenance Priority: _____
Deployed: _____

Signature



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