

INSPECTION FORM

Full Body Harness



OSHA 1926.502(d)(21)

Personal fall arrest systems shall be inspected before each use. In case of damage, deterioration and defective components, it should be removed from maintenance services.



6.1 Inspection

6.1.1 Equipment SHALL be inspected by the user before each use and, additionally, by a competent person other than the user at intervals of no more than one year

Frequency of inspection in the following categories:

General Industry: _____ Construction: _____

Your Organization: _____ Manufacturer: _____

Manufacturer of equipment:

Name of Manufacturer: _____

Serial #: _____ Model #: _____

Date of Manufacture: ____ / ____ / ____

Inspection:

Date: ____ / ____ / ____

Name of competent person:

Name of user (authorized person):



INSPECT **1** HARDWARE **2** WEBBING

3 STITCHING **4** LABELS/TAG

1	HARDWARE	PASS	FAIL	NOTE
	Rust/corrosion			
	Deformed/bent			
	Burrs/cracks			
	Weld spots/slag			
	Missing rivets			
	Springs			
	Functionality			
	Other			

2	WEBBING	PASS	FAIL	NOTE
	Cuts/burns/holes			
	Excessive wear			
	Excessive UV damage			
	Chemical attack			
	Other			

3	STITCHING	PASS	FAIL	NOTE
	Missing			
	Loose			
	Broken			
	Other			

4	LABELS/TAGS	PASS	FAIL	NOTE
	Missing			
	Illegible			
	Dates			
	Other			

*Before inspection, please carefully review the operating instructions to fully understand the structure and compatibility of the equipment.

