INSPECTION FORM VERTICAL LIFELINES

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 MATERIAL 3 SHOCK PACK 4 ROPE GRAB 5 LABEL/TAGS

1 HARDWARE	PASS	FAIL	NOTE
Connector (Self-Closing & Locking)			
Hook Gate / Rivets			
Corrosion			
Pitting / Nick			

2 MATERIAL	PASS	FAIL	NOTE
Broken / Missing / Loose Stitching			
Termination (Stitch, Splice, or Swage)			
Excessive Wear (Fraying or Broken Strands)			
Cuts / Burns / Holes			
Kinks			
Separation / Bird-Caging			

3 SHOCK PACK	PASS	FAIL	NOTE
Cover / Shrink Tube (Don't Cut or Remove)			
Damage / Fraying / Broken Stitching			
Impact Indicator (Signs of Deployment)			

4 ROPE GRAB	PASS	FAIL	NOTE
Locks on lifeline automatically			
Moves freely when disengaged			
No visible damage, rust or corrosion			

5 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.