

## Purpose

This Daily Safety Walk Checklist is a structured, field-ready tool designed to help safety professionals, supervisors, and site leads conduct a thorough visual inspection of their workplace at the start of each shift. It covers the nine categories most frequently cited in OSHA inspections and is grounded in applicable 29 CFR standards.

The goal is simple: identify hazards before they become incidents. A consistent daily walk builds a culture of accountability, gives your team documented evidence of proactive compliance, and ensures that corrective actions are captured and tracked to closure — not lost in a binder or an email chain.

## Who Should Use This Checklist

- Safety Managers and EHS Coordinators performing daily or shift-start inspections
- Supervisors and Foremen responsible for their crew's work area
- Superintendents conducting periodic safety walk-throughs
- Safety Committee members rotating weekly inspection duties
- Any trained employee assigned to a safety observation role

## How to Use This Checklist

1. Complete the header on each page.

Fill in the date, your name, the specific location or work area being inspected, the shift, and current weather or temperature conditions. Each page has its own header so pages can be separated if needed.

2. Walk the work area with the checklist in hand.

Move through the space methodically. Don't inspect from a desk or a distance — physically walk every aisle, exit path, and work station covered by that day's walk area. Look at eye level, above, and at floor level.

3. Mark each inspection item.

For every line item, mark one of the three status columns: • OK — The condition meets the standard. No action needed. • N/A — The item does not apply to this work area today. • CA — Corrective Action required. A deficiency was found.

4. Document every finding immediately.

If you mark "CA" on any item, turn to the Findings & Corrective Actions Log and record: the category and location, a clear description, severity level (C = Critical 24 hrs, S = Serious 72 hrs, M = Minor 30 days), the person assigned to fix it by name, and a specific completion deadline.

5. Brief the team.

Share your findings with the affected supervisor or crew. Corrective actions should be communicated face-to-face, not just written down. If a Critical finding is identified, stop work in that area until an interim control is in place.

6. Obtain signatures and file.

The inspector and the reviewing supervisor both sign the bottom of the findings page. Retain the completed checklist for your records — OSHA may request documentation of your safety walk program during an inspection. Keep completed forms for a minimum of one year.

7. Follow up on corrective actions.

Track every open CA to verified closure. A finding that is documented but never corrected is worse than not documenting it at all — it becomes evidence of a known hazard. Use the "Verified Closed" column to confirm completion.

## Inspection Frequency & Special Notes

- Daily walk: Complete this checklist at the start of each shift for every active work area.

- Portable fire extinguishers: In addition to the daily accessibility check, OSHA requires a documented visual inspection at least once per month (29 CFR 1910.157(e)(2)). Check the pressure gauge, pull pin and tamper seal, hose condition, mounting bracket, and that the annual service tag is current. Record the date and inspector initials on the extinguisher's monthly tag.
- Corrective actions: Critical findings require immediate interim controls and permanent fix within 24 hours. Serious findings within 72 hours. Minor findings within 30 days.
- Record retention: Maintain completed checklists for a minimum of 1 year. OSHA and insurance auditors may request evidence of your daily walk program.
- Customization: This checklist covers the most commonly cited OSHA standards. Add site-specific items, process-specific hazards, or seasonal considerations (heat illness, cold stress, severe weather) as needed for your facility.

## Column Definitions

OK	Condition meets the applicable standard. No corrective action needed.
N/A	Item does not apply to this work area or is not present today.
CA	Corrective Action required. Document the finding on the Findings Log and assign to a named owner with a deadline.

DATE \_\_\_\_\_ LOCATION / WORK AREA \_\_\_\_\_ INSPECTOR NAME \_\_\_\_\_ SHIFT \_\_\_\_\_ WEATHER / TEMP \_\_\_\_\_

CA = Corrective Action Required • Assign each finding to a named owner with a completion deadline before end of shift • Document on Page 5

INSPECTION ITEM	OK	N/A	CA
<b>HOUSEKEEPING &amp; GENERAL ORDER</b>			
<input type="checkbox"/> Floors, aisles, and walkways are clean, dry, and free of debris <small>29 CFR 1910.22</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Work areas and passageways are free of protruding nails, scrap lumber, and clutter <small>29 CFR 1926.25</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Waste containers are not overflowing; trash is disposed of regularly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Materials are stored in designated locations — not blocking aisles or exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Spills are cleaned up promptly; wet floor signs posted where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Adequate lighting throughout all work areas — no burned-out bulbs <small>29 CFR 1926.26</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>SLIPS, TRIPS &amp; FALLS</b>			
<input type="checkbox"/> Walking surfaces are free of cords, hoses, and tripping hazards <small>29 CFR 1910.22</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Stairways have intact handrails on both sides and are clear of objects <small>29 CFR 1910.24</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Floor openings, holes, and open edges are covered or guarded <small>29 CFR 1910.23</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Anti-slip matting is in place at entrances and wet areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Ladders are in good condition, rated for load, stored properly when not in use <small>29 CFR 1926.1053</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Elevated work areas have guardrails: top rail 42–45", mid-rail, and toe board <small>29 CFR 1926.502</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>FIRE SAFETY &amp; EMERGENCY EQUIPMENT</b>			
<input type="checkbox"/> Fire extinguishers are accessible, fully charged, and tagged within the last 12 months <small>29 CFR 1910.157</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Portable fire extinguishers have received a documented visual inspection this month (check gauge, pin, seal, hose, and mounting) <small>29 CFR 1910.157(e)(2)</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Sprinkler heads have minimum 18" clearance; no materials blocking heads <small>NFPA 13</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exit doors are unobstructed, clearly marked, and unlocked from inside <small>29 CFR 1910.37</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exit signs are illuminated and visible from all approach directions <small>29 CFR 1910.37</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> First aid kits are stocked, accessible, and clearly marked <small>29 CFR 1910.151</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Eyewash stations are accessible, unobstructed, and flushed within the last week <small>29 CFR 1910.151</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> No accumulation of combustible materials: cardboard, oily rags, or flammable scrap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DATE	LOCATION / WORK AREA	INSPECTOR NAME	SHIFT	WEATHER / TEMP
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INSPECTION ITEM	OK	N/A	CA
<b>ELECTRICAL SAFETY</b>			
<input type="checkbox"/> All electrical cords are free of fraying, cuts, or damaged insulation <small>29 CFR 1910.305</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Extension cords are not used as permanent wiring; not run under rugs or through walls <small>29 CFR 1910.305</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Electrical panels are accessible, labeled, and all panel doors fully closed <small>29 CFR 1910.303</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> GFCI protection in place at all wet locations and outdoor receptacles <small>29 CFR 1926.404</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Outlets and junction boxes have covers installed; no open knockouts <small>29 CFR 1910.305</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>MACHINE GUARDING &amp; EQUIPMENT</b>			
<input type="checkbox"/> All machine guards are in place and properly secured; none removed or bypassed <small>29 CFR 1910.212</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Point-of-operation guards are functioning on all applicable machines <small>29 CFR 1910.212</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Emergency stop buttons are clearly labeled, unobstructed, and operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Lockout/Tagout procedures are posted at all equipment requiring energy isolation <small>29 CFR 1910.147</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Equipment showing damage or abnormal noise/vibration is tagged out pending repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Manufacturer-required pre-use equipment checks have been completed and documented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>PERSONAL PROTECTIVE EQUIPMENT (PPE)</b>			
<input type="checkbox"/> All workers wearing required hard hats, safety glasses, and high-vis PPE in good condition <small>29 CFR 1910.135</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Foot protection (steel-toed) worn in crush and struck-by hazard areas <small>29 CFR 1910.136</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Gloves appropriate to the specific hazard are available and in use <small>29 CFR 1910.138</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Hearing protection available and used in areas with noise $\geq$ 85 dB <small>29 CFR 1910.95</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Respiratory protection worn where required; workers fit tested and medically cleared <small>29 CFR 1910.134</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> All PPE is in good condition, stored correctly, and accessible at point of use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>HAZARD COMMUNICATION &amp; CHEMICALS</b>			
<input type="checkbox"/> All chemical containers labeled with GHS hazard warnings; no unlabeled containers <small>29 CFR 1910.1200</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Safety Data Sheets (SDS) are accessible to workers at all times during the shift <small>29 CFR 1910.1200</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Flammable materials are stored in approved cabinets, away from ignition sources <small>29 CFR 1910.106</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Chemical containers are closed when not in use; spill kits are accessible nearby	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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INSPECTION ITEM	OK	N/A	CA
<b>MATERIAL HANDLING &amp; POWERED EQUIPMENT</b>			
<input type="checkbox"/> Forklift / PIT operators are certified and current on 3-year recertification <small>29 CFR 1910.178</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Forklifts and PIT equipment have completed a documented pre-use inspection today <small>29 CFR 1910.178</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Load ratings are posted on forklifts, shelving, and mezzanines; ratings not exceeded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heavy or bulky materials are stored low; stacking height does not create a tipping hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Pedestrian walkways in vehicle traffic areas are clearly marked and respected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>EMERGENCY PREPAREDNESS &amp; READINESS</b>			
<input type="checkbox"/> Emergency evacuation routes are posted and visible; all exits are unobstructed <small>29 CFR 1910.38</small>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Emergency contacts and assembly point are posted and known to all workers on site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> AED is accessible, charged, and within calibration; pads within expiration date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Contractors and visitors on-site today have completed site safety orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> First responders: nearest hospital and site EMS directions are posted at site entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### FINDINGS & CORRECTIVE ACTIONS LOG

Complete one row per finding identified during today's walk.

<b>C — Critical</b> Imminent danger. Interim control required immediately. Permanent fix within 24 hours.	<b>S — Serious</b> Significant injury potential. Resolve within 72 hours.	<b>M — Minor</b> Low risk, best practice improvement. Resolve within 30 days.
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#	Category / Location	Finding Description	Sev.	Assigned To	Due By	Verified Closed
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

### ADDITIONAL NOTES / OBSERVATIONS

Inspector Signature \_\_\_\_\_ Supervisor Review Signature \_\_\_\_\_ Total Findings: \_\_\_\_\_ CAs Assigned: \_\_\_\_\_