

INSPECTION FORM:

Full Body Harness



OSHA 1926.502(d)(21)

Personal fall arrest systems SHALL be inspected prior to each use for wear, damage, and other deterioration, and defective components SHALL be removed from service.



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):



LOOK AT: **1** HARDWARE **2** WEBBING
3 STITCHING **4** LABELS/TAGS

1	HARDWARE	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Rust/corrosion		
	Deformed/bent		
	Burrs/cracks		
	Weld spots/slag		
	Missing rivets		
	Springs		
	Functionality		
	Other		

2	WEBBING	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Cuts/burns/holes		
	Excessive wear		
	Excessive UV damage		
	Chemical attack		
	Other		

3	STITCHING	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Missing		
	Loose		
	Broken		
	Other		

4	LABELS/TAGS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Missing		
	Illegible		
	Dates		
	Other		

PASS FAIL