

Lock-Out Tag-Out/Zero Mechanical State Periodic Inspection Form

This LOTO periodic inspection shall be conducted by an authorized, trained employee who does not participate in the lockout process being inspected, at least annually. This inspection must be conducted as the lockout procedure is being implemented. Any deficiency found in the LOTO procedure must be corrected immediately and all authorized employees must be re-trained on that LOTO procedure. If a situation is discovered to be immediately dangerous to life or health, the LOTO process must be terminated.

Date: _____ Department: _____

Location / Building: _____

Authorized Employee Inspected: _____

Person Completing the Inspection: _____

Name of Equipment: _____

Type of LOTO Procedure:

- Equipment Specific LOTO Procedure Appendix B (Simple Electrical) Appendix D (Vehicle)

LOTO Procedures Inspection Questions

YES	NO	N/A	Questions
<input type="checkbox"/>	<input type="checkbox"/>		Has the employee completed initial Authorized Employee LOTO training?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has the Authorized Employee completed LOTO training for the Equipment Specific LOTO Procedure(s)?
<input type="checkbox"/>	<input type="checkbox"/>		Has there been a change in job assignment, machines, equipment, or processes that present a new hazard requiring retraining of Authorized Employees?
<input type="checkbox"/>	<input type="checkbox"/>		Are the Authorized Employee's training records available for review?
<input type="checkbox"/>	<input type="checkbox"/>		Is a LOTO procedure available for this piece of equipment?
<input type="checkbox"/>	<input type="checkbox"/>		Is an Equipment Specific LOTO Procedure required for this piece of equipment?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee know the location of the LOTO procedure?
<input type="checkbox"/>	<input type="checkbox"/>		Does the written LOTO procedure list and describe the known energy sources?
<input type="checkbox"/>	<input type="checkbox"/>		Does the written LOTO procedure include procedural steps for de-energizing and controlling all identified potential hazardous energy sources?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Were all affected employees properly notified before servicing the piece of equipment?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee identify and locate all energy sources?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee use the appropriate LOTO locks, tags and devices?
<input type="checkbox"/>	<input type="checkbox"/>		Did the LOTO device contain written, legible information identifying the Authorized Employee?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee attempt to start-up the piece of equipment to test the LOTO procedures before conducting work?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee return the controls to the off position after verifying the isolation and de-energization of the piece of equipment?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If more than one authorized employee working on the piece of equipment, did each employee have his/her own lock and tag?
<input type="checkbox"/>	<input type="checkbox"/>		Was the LOTO procedure performed correctly?
<input type="checkbox"/>	<input type="checkbox"/>		Did the Authorized Employee follow the appropriate procedures for LOTO removal and re-energizing the piece of equipment?

Authorized Employee's Signature: _____	Inspector's Signature: _____
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*** This inspection record must be maintained by the Department for minimum of two years.**