

CSU East Bay General Department Safety Checklist

Inspection Performed by: _____ **Phone:** _____ **Area Supervisor:** _____
(Print Full Name) (Print Full Name)

Department: _____ **Building:** _____ **Room(s) Inspected:** _____ **Date:** _____

This checklist is meant to be a guide to identify potential hazards in your work area and have the hazards corrected. If you have questions, please contact the Department of Environmental Health & Safety (X5-4138).

OK	Action needed	N/A	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Aisles and passageways are kept cleared. There are no items or cords running across the walkway that can present a tripping hazard.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Exit routes are kept clear. Furniture (tables, chairs, drop-off boxes, etc) are not placed in the hallway.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Stored materials are secured or limited in height to prevent tipping, falling, or collapsing.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Heavy items are not stored on top of shelves/cabinets.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Electrical cords are not worn, frayed, abraded, or corroded.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Extension cords and surge protectors are not daisy chained (connected/linked together to provide additional length or ports).
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Wires, computer cords and cables underneath desk and around workspace are not a tripping hazard.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Any portable fire extinguishers located in your office/department are inspected monthly.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. Fire extinguishers and emergency equipment are not blocked.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. There is sufficient lighting in the stairwell and walking aisles.
			11. Other hazards?

For each item above that needs action, indicate below (or on an attached page) the exact location of the problem. *Retain a copy of the completed checklist to follow up on any deficiencies observed.*

Return the completed form to the Department of Environmental Health and Safety (SA 1600)