

Daily OHSE Office Safety Checklist Template

Company Name:

Date: _____

Location: _____

Person Completing Checklist: _____

1. General Safety

- Workspaces are clean and free of clutter.
- Walkways and emergency exits are clear of obstacles.
- Flooring is in good condition with no trip hazards (e.g., loose carpets, cords, or mats).
- Lighting is adequate and functional in all areas.
- Ergonomically correct workstations are set up for all employees.

Comments/Notes:

2. Fire Safety

- Fire extinguishers are accessible and properly mounted.
- Fire exits are clearly marked and not blocked.
- Smoke detectors are functional and have been tested recently.
- Emergency evacuation plan is posted and visible to all employees.
- Flammable materials are properly stored away from ignition sources.

Comments/Notes:

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3. Electrical Safety

- Electrical outlets are not overloaded.
- Extension cords are in good condition and used only temporarily.
- All electrical cords are inspected for damage (frayed wires, exposed cords).
- Equipment is turned off when not in use.
- Power strips are used appropriately, and not daisy-chained.

Comments/Notes:

4. Personal Protective Equipment (PPE)

- All required PPE (e.g., gloves, safety glasses) is available and in good condition.
- Employees are trained in PPE use and wearing it as needed.
- PPE storage is clean and organized.

Comments/Notes:

5. First Aid and Emergency Preparedness

- First aid kits are stocked and accessible.
- Emergency contact numbers are posted and up-to-date.
- Employees are aware of the location of emergency equipment (fire extinguishers, AED, first aid kit).
- Injuries or incidents are reported immediately.

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Comments/Notes:

6. Environmental Safety

- Waste is properly disposed of in designated containers (e.g., recycling, trash, hazardous waste).
- Indoor air quality is adequate, with proper ventilation and no odors or pollutants.
- Chemicals are labeled and stored safely.
- No evidence of spills or leaks (e.g., water, chemicals).

Comments/Notes:

7. Security

- All entry points (doors, windows) are secure.
- Security systems (if applicable) are functioning.
- Visitors are properly signed in and escorted when necessary.

Comments/Notes:

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8. COVID-19 and Hygiene Measures (If Applicable)

- Hand sanitizers are available at common points (e.g., entrances, bathrooms).
- Common areas (kitchen, bathroom) are cleaned and sanitized regularly.
- Face masks, if required, are available and used where appropriate.
- Social distancing measures are being followed.

Comments/Notes:

9. Additional Comments/Observations

Signature:

Inspector's Name: _____

Signature: _____

Date: _____