

Annual Inspection Form | Full body harness

The University requires documentation of inspection on all fall protection equipment.

All damaged equipment must be taken out of service until it is replaced or repaired. Contact your supervisor with questions or concerns regarding fall protection equipment.

_____	_____
Inspector's name	Inspector's employee ID
_____	_____
Department	Inspection date
_____	_____
Manufacturer and equipment name	In-service date
_____	_____
Manufacturer model and serial #	Manufacture date

Y = Yes N = No N/A = Not Applicable

Impact indicator	Y	N	N/A
1. Damaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Missing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Deployed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Reserve lifeline deployed if applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Buckles	Y	N	N/A
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5. Cracked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Poor function	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Missing parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Corroded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Burrs / sharp edges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Bent / distorted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Damaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Labels

Y N N/A

12. Present and attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Legible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Plastic keepers

Y N N/A

14. Missing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Damaged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D-rings

Y N N/A

16. Cracked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Welded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Bent / distorted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Corroded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Sharp edges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Connectors

Y N N/A

21. Cracked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Webbing

Y **N** **N/A**

39. Cuts / tears / holes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Burns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Frays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Knots	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. UV damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Grease / grime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Discoloration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Mold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Missing / damaged stitch pattern	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Heat damage / glazing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Permanent marking on load bearing webbing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Abrasion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Pass

Fail

Comments:

Questions? Contact ASU Environmental Health and Safety
at 480-965-1823 or email asuehs@asu.edu.

Revision date 9/2/2021