

Checklist

Slips, Trips and Falls



Building Name:		Inspector Name:	
Building Address:		Date:	
Building Occupancy:		Public Access:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Category:	Hazard:	Response:	Comments:
General	Lighting Adequate?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Weather Hazard?	<input type="checkbox"/> Ice <input type="checkbox"/> Rain <input type="checkbox"/> Other	
		Signage: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
		Salted: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Time:
		Sanded: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Time:
	Parking Lot Snow Removed:	<input type="checkbox"/> N/A Time:	
Exterior Hazards:			
Stairways	Condition:	<input type="checkbox"/> Good <input type="checkbox"/> Adequate <input type="checkbox"/> Poor	
	Handrails:	<input type="checkbox"/> Good <input type="checkbox"/> Adequate <input type="checkbox"/> Poor	
Sidewalks	Uneven walking surfaces:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Transitions Painted:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Walking Surfaces	Uneven walking surfaces:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Debris in area:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Parking Lots	Speed bumps painted:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Condition:	<input type="checkbox"/> Good <input type="checkbox"/> Adequate <input type="checkbox"/> Poor	
	Parking curbs centered:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Potholes/Cracks Observed:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Drainage Adequate:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Snow Removal:	<input type="checkbox"/> Contractor <input type="checkbox"/> Employees	
	Documented:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Time:
Interior Hazards			
Entryways	Mats at entrances	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Mats in good condition:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Floor Surfaces	Uneven walking surfaces:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Cracks greater than ¼":	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Trip Hazards (cords etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Floor Cleaners Used:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Type:
	Wet Floor Signage:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Stairways	Condition:	<input type="checkbox"/> Good <input type="checkbox"/> Adequate <input type="checkbox"/> Poor	
	Non-slip edges:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
	Handrails:	<input type="checkbox"/> Good <input type="checkbox"/> Adequate <input type="checkbox"/> Poor	
Elevator	<1" height at each floor	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Disclaimer: This checklist cannot list all the types of risks that exist, and HUB International is not responsible for any risk not listed here.