

WAREHOUSE DISTRIBUTION INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Facility Condition

- Yes No — Floors are clean, dry, and free of cracks or trip hazards
- Yes No — Aisles are clear and wide enough for safe equipment movement
- Yes No — Racks and shelving are secure, labeled, and undamaged

Material Handling Equipment

- Yes No — Forklifts, pallet jacks, and conveyors are inspected and functional
- Yes No — Equipment maintenance records are current
- Yes No — Operators are trained and certified

Inventory Storage

- Yes No — Goods are stacked safely and within weight limits
- Yes No — Hazardous materials are properly labeled and stored
- Yes No — Perishable items are stored at appropriate temperatures

Fire Safety

- Yes No — Fire extinguishers are present, inspected, and accessible
- Yes No — Emergency exits are marked and unobstructed
- Yes No — Fire alarms and suppression systems are tested regularly

Lighting and Visibility

- Yes No — Adequate lighting is provided in all warehouse areas
- Yes No — Emergency lighting is operational
- Yes No — Exit signs are illuminated and clearly visible

Pest Control

- Yes No — No evidence of rodents, insects, or birds
- Yes No — Pest control services are performed and logged
- Yes No — All food-grade items are protected from contamination

Employee Safety and PPE

- Yes No — Staff wear appropriate PPE (steel-toed boots, vests, gloves)
- Yes No — Safety training is current and documented
- Yes No — First aid kits and eyewash stations are accessible

Loading and Shipping Areas

- Yes No — Dock plates and levelers are in good condition
- Yes No — Vehicle restraints and bumpers are in place and functional
- Yes No — Packages are handled and loaded without damage

Housekeeping and Waste Management

- Yes No — Trash and recycling are properly managed and emptied regularly
- Yes No — No blocked access to emergency equipment or exits
- Yes No — Cleaning supplies and chemicals are stored safely

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately