

EXCAVATION & TRENCHING SAFETY INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

SITE PREPARATION & CONDITIONS

- Yes No — Excavation location has been properly marked and permitted
- Yes No — Underground utilities have been located and isolated
- Yes No — Soil type has been classified for appropriate protective system
- Yes No — Weather and site conditions do not compromise stability

ACCESS & EGRESS

- Yes No — Ladders, ramps, or stairs are provided within required travel distance
- Yes No — Access points are free of obstruction and maintained safely
- Yes No — Workers can enter and exit trench without hazard

TRENCH WALL PROTECTION & STABILIZATION

- Yes No — Sloping, benching, shoring, or trench shields are in place as required
- Yes No — Protective systems are installed per engineering specifications
- Yes No — No visible soil movement, cracks, or sloughing observed
- Yes No — Spoil piles are kept back the required distance from the trench edge

ENVIRONMENTAL & ATMOSPHERIC HAZARDS

- Yes No — Water accumulation is controlled and pumped out when needed
- Yes No — Atmospheric testing is conducted for oxygen, toxics, and flammables
- Yes No — Ventilation is provided where hazardous atmospheres may exist
- Yes No — No evidence of flooding, runoff, or erosion impacting trench safety

PROXIMITY HAZARDS & EQUIPMENT

- Yes No — Heavy equipment and vehicles operate safely around excavation
- Yes No — Stability of adjacent structures is monitored and protected
- Yes No — Overhead loads are restricted from passing over workers
- Yes No — Barricades and barriers prevent unauthorized access

WORKER PROTECTION & COMPLIANCE

- Yes No — Competent person conducts inspections as required
- Yes No — Workers are trained in excavation hazards and emergency procedures
- Yes No — PPE is used including helmets, gloves, boots, and high-visibility gear
- Yes No — OSHA or regional regulatory requirements are being met

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately

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