

SCAFFOLDING & FALL PROTECTION INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Scaffolding Structural Condition

- Yes No — All scaffold components are structurally sound
- Yes No — No visible damage, bends, cracks, or corrosion
- Yes No — Scaffold is erected on firm and level foundation
- Yes No — Proper bracing and cross-supports are installed

Guardrails, Toe Boards & Platforms

- Yes No — Guardrails are secure at required heights
- Yes No — Toe boards installed on elevated platforms
- Yes No — Platforms are fully decked and secured
- Yes No — Gaps, openings, and trip hazards minimized

Access & Egress

- Yes No — Ladders or stairways provide safe access
- Yes No — Entry points free from obstructions
- Yes No — Slip-resistant surfaces are present
- Yes No — Access points comply with height regulations

Load Capacity & Materials Handling

- Yes No — Load ratings are visible and monitored
- Yes No — Materials stored safely without overload
- Yes No — Hoisting procedures follow safe practices
- Yes No — No excess debris on working platforms

Fall Protection Systems

- Yes No — Harnesses, lanyards, and anchors are inspected
- Yes No — Fall arrest systems meet regulatory standards
- Yes No — Anchorage points properly rated
- Yes No — Energy absorbers and connectors function properly

Worker Training & Competency

- Yes No — Workers trained in scaffold safety
- Yes No — Fall protection training documented
- Yes No — Competent person assigned for oversight
- Yes No — Daily inspections are recorded

Environmental & Site Conditions

- Yes No — Weather conditions evaluated for safe use
- Yes No — Wind loads within acceptable limits
- Yes No — Work area free of power lines or electrical hazards
- Yes No — Lighting adequate for safe operations

Compliance & Documentation

- Yes No — Scaffold tag system in use and up to date
- Yes No — Regulatory compliance requirements reviewed
- Yes No — Inspection logs maintained and accessible
- Yes No — Incident or near-miss reports completed

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately

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