

Manufacturing Workplace Inspection Checklist

Manufacturing

GENERAL

Type of change

Describe the change

Document of MOC

Is the environment department notified?

☐ Yes ☐ No ☐ Na

Is there a need to increase the production limits on ECA permits?

☐ Yes ☐ No ☐ Na

Is spill possible due to change?

☐ Yes ☐ No ☐ Na

Are fire accidents possible due to change?

☐ Yes ☐ No ☐ Na

Is there involvement of flammables or combustibles in the change process?

Yes

No

Na

Is there involvement of acids, corrosives or alkalies in the change process?

Yes

No

Na

Is there involvement of designated substances in the change process?

Yes

No

Na

Is there an increase in the number of chemicals or metals used?

Yes

No

Na

Is substance notification requirements, NPRI, Spill plan verified?

Yes

No

Na

Is waste generated recyclable?

Yes

No

Na

Does the change produce any hazardous wastes or by-products?

Yes

No

Na

Types of wastes produced

Yes

No

Na

Are additional waste bins needed?

Yes

No

Na

Is energy usage increased?

Yes

No

Na

Type of energy

Number of extra waste bins needed

The equipment energy saving ratings

Any other equipment which is more energy efficient

Is addition to the environmental aspects list needed?

Yes

No

Na

Is addition to the significant environmental aspects list needed?

Yes

No

Na

Is there a need of a controlled environment?

Yes

No

Na

Is the change documented?

Yes

No

Na

Does the change exhaust to outside?

Yes

No

Na

Exhaust number/stack

Yes

No

Na

Is there a need for an exhaust system or air scrubber?

Yes

No

Na

Does it affect Environmental Legislation?

Yes

No

Na

Is there a pre-requisite for the change?

Yes

No

Na

Are permits/certificates or testing necessary before implementation?

Yes

No

Na

Is there a need for industrial hygiene testing for air, noise, or vibration?

Yes

No

Na

Measure internal noise

Yes

No

Na

Is there an ESA sticker on electrical equipment?

Yes

No

Na

Has the engineer completed all pre-start safety reviews?

Yes

No

Na

Are all non-conformances corrected?

Yes

No

Na

Has the line engineer completed the ergonomic design checklist?

Yes

No

Na

Has the engineer completed hazard assessment/risk assessment?

Yes

No

Na

Do all equipment abide by regulations for industrial establishments?

Yes

No

Na

Are lock-out / tag-out signs posted?

Yes

No

Na

Is identification and labeling of lock-out points done?

Yes

No

Na

Is filling of operator instruction sheets done?

Yes

No

Na

Is filling of pre-use inspection sheets done?

Yes

No

Na

Are additional specific procedures required?

Yes

No

Na

Are additional emergency responses required?

Yes

No

Na

Are additional postings required?

Yes

No

Na

Are additional PPE required?

Yes

No

Na

Additional PPE

Describe the update needed for the EEHS training plan for this change

SIGN OFF

Comments

Auditor name

Auditor signature

SIGNATURE

Date

DATE

2017-01-01