Worksite Safety, Security, and Sanitation Audit

Revised 6-6-14

North Carolina Department of Transportation, Division of Highways
Transportation Mobility and Safety Division

Scheduled: ☐
Unscheduled: ☐

County and Location: _____ Division: _____

Date: _____ Time: _____ (AM or PM) No. of Persons: _____

Unit/Section: _____

Persons Present (names): _____

_____

1. Work Activity (check all that apply)

(codes correspond to Workplace Safety Manual safe operating procedures)

- ☐ Accident and Injury Response (10-1)
- ☐ Electrical Installation/Repairs (11A-4)
- ☐ Equipment Mounting and Dismounting (10-5)
- ☐ Field Surveying (11B-35)
- ☐ Hand Removal of Vegetation (11B-42)
- ☐ Hand Tools, Power and Manual (12B-13)
- ☐ Hazardous Materials (10-10)
- ☐ Horizontal Curve Data Collection (TEPPL W-32)
- ☐ Ladder (12B-15)
- ☐ Lifting (10-13)
- ☐ Loading/Unloading Freight (11A-13)
- ☐ Lockout/Tagout (11E-8)
- ☐ Roadway Inspection (11B-69)
- ☐ Traffic Signal Installation/Maintenance (11B-82)
- ☐ Traffic Survey Equipment/Maintenance (11B-83)
- ☐ Trailers and Towed Equipment (12B-30)
- ☐ Truck, Aerial Device (12A-26)
- ☐ Utility Make-Ready Field Investigations (TEPPL W-32)
- ☐ Vehicle Operation (10-19)
- ☐ Work Zone Safety/Traffic Control (10-21)
- ☐ Working Near Overhead High-Voltage Lines (10-22)
- ☐ Other: _____
- ☐ Other: _____

2. Personal Protective Equipment (PPE)

		S	U	NA
a.	Safety vests	☐	☐	☐
b.	Head protection	☐	☐	☐
c.	Hand protection	☐	☐	☐
d.	Foot protection	☐	☐	☐
e.	Hearing protection	☐	☐	☐
f.	Eye protection	☐	☐	☐
g.	Insect and tick protection (check expiration date)	☐	☐	☐
h.	Poisonous plant protection (check expiration date)	☐	☐	☐
i.	Sun protection (hat, sunscreen, etc.)	☐	☐	☐
j.	Elevated Protection (harness/lanyard)	☐	☐	☐
k.	Seat belts	☐	☐	☐
l.	Other: _____	☐	☐	☐
m.	Other: _____	☐	☐	☐

3. General Equipment

		S	U	NA
a.	Back-up alarms	☐	☐	☐
b.	Strobe Lights, light bars, portable beacons	☐	☐	☐
c.	Equipment and hand tool condition	☐	☐	☐
d.	Equipment and hand tool storage	☐	☐	☐
e.	Warning signs	☐	☐	☐
f.	Cones	☐	☐	☐
g.	Extinguishers - charged and inspected	☐	☐	☐
h.	Extinguishers - conspicuous and accessible	☐	☐	☐
i.	Equipment	☐	☐	☐
j.	Other: _____	☐	☐	☐
k.	Other: _____	☐	☐	☐

4. Other/Miscellaneous

		S	U	NA
a.	Tailgate safety meeting	☐	☐	☐
b.	Spotters	☐	☐	☐
c.	Visibility	☐	☐	☐
d.	Lighting - ambient	☐	☐	☐
e.	Lighting - artificial	☐	☐	☐
f.	Other: _____	☐	☐	☐
g.	Other: _____	☐	☐	☐
h.	Other: _____	☐	☐	☐

5. Health and First Aid

		S	U	NA
a.	First aid kit - conspicuous and accessible	☐	☐	☐
b.	First aid kit - fully stocked	☐	☐	☐
c.	First aid kit - expiration dates not reached	☐	☐	☐
d.	Hazardous materials - identified/stored	☐	☐	☐
e.	Potable water	☐	☐	☐
f.	Bathroom facilities	☐	☐	☐
g.	Breaks (frequency, duration, etc.)	☐	☐	☐
h.	Other: _____	☐	☐	☐
i.	Other: _____	☐	☐	☐

S - satisfactory
U - unsatisfactory
NA - not applicapble/not necessary

Discrepancies:

Item	Comments and/or Corrective Action	Abatement Dates	
		Target Date	Date Corrected

General Comments:

Audited by: _____ Signature: _____

Witnessed by: _____ Signature: _____

Copies to: Supervisor, Section Head, Unit Head, and Branch Safety Officer