

Auto Service Bay Safety Checklist (US)

Safety & Compliance | US

| | | |
|------------------------|------------|------|
| DATE ____/____/____ | CHECKED BY | SHOP |
|------------------------|------------|------|

LIFTS & JACKS

| | OK | NOT OK | | OK | NOT OK |
|----------------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|
| Lift pads clean and intact | <input type="radio"/> | <input type="radio"/> | No fluid leaks from cylinders | <input type="radio"/> | <input type="radio"/> |
| Lift arms moving freely | <input type="radio"/> | <input type="radio"/> | Jack stands available and rated | <input type="radio"/> | <input type="radio"/> |
| Safety locks engaging | <input type="radio"/> | <input type="radio"/> | Floor jack wheels rolling freely | <input type="radio"/> | <input type="radio"/> |

AIR & ELECTRICAL

| | OK | NOT OK |
|----------------------------------|------------------------------|---------------------------------|
| Compressor at operating pressure | <input type="radio"/> | <input type="radio"/> |
| Air hoses in good condition | <input type="radio"/> | <input type="radio"/> |
| Extension cords (temporary only) | <input type="radio"/> | <input type="radio"/> |
| GFCIs tested | <input type="checkbox"/> OK | <input type="checkbox"/> Not OK |
| | <input type="checkbox"/> N/A | |
| Drop lights in good condition | <input type="checkbox"/> OK | <input type="checkbox"/> Not OK |

FIRE SAFETY

| | OK | NOT OK | | OK | NOT OK |
|---|-----------------------|-----------------------|--------------------------|-----------------------|-----------------------|
| Fire extinguisher per bay <small>OSHA 1910.157</small> | <input type="radio"/> | <input type="radio"/> | No smoking enforced | <input type="radio"/> | <input type="radio"/> |
| No oily rags on floor (metal can only) | <input type="radio"/> | <input type="radio"/> | Flammable cabinet closed | <input type="radio"/> | <input type="radio"/> |

VENTILATION

| | OK | NOT OK |
|----------------------------------|------------------------------|---------------------------------|
| Tailpipe exhaust hoses available | <input type="radio"/> | <input type="radio"/> |
| Bay door ventilation adequate | <input type="radio"/> | <input type="radio"/> |
| CO detector working | <input type="checkbox"/> OK | <input type="checkbox"/> Not OK |
| | <input type="checkbox"/> N/A | |

FLOOR & HAZCOM

| | OK | NOT OK | | OK | NOT OK |
|--------------------------------|-----------------------|-----------------------|--|-----------------------|-----------------------|
| Floor clean, oil-dry available | <input type="radio"/> | <input type="radio"/> | SDS binder accessible <small>OSHA 1910.1200</small> | <input type="radio"/> | <input type="radio"/> |
| Drain covers in place | <input type="radio"/> | <input type="radio"/> | Chemical labels legible (GHS) | <input type="radio"/> | <input type="radio"/> |

PPE

| | OK | NOT OK | | OK | NOT OK |
|----------------------------------|-----------------------|-----------------------|--|-----------------------|-----------------------|
| Safety glasses available | <input type="radio"/> | <input type="radio"/> | Hearing protection for pneumatic tools | <input type="radio"/> | <input type="radio"/> |
| Nitrile and cut-resistant gloves | <input type="radio"/> | <input type="radio"/> | Steel-toe boots worn | <input type="radio"/> | <input type="radio"/> |

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SIGN-OFF

Issues found _____

Signature _____

Notes

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