

Lockout Tagout Periodic Inspection Form

Instructions: Use this form to conduct a periodic inspection of a lockout tagout procedure. Periodic inspections must be conducted at least annually. The inspector must observe an authorized employee perform each step of the procedure. If any corrective actions to the procedure are required, an authorized employee must make necessary changes or corrections to the procedure. This form must be approved by a department supervisor and kept on file with the most current procedure.

Responsible Department/Area		Specific Location	
Type of Equipment		UMBC Asset/Equipment ID #	
Name of Inspector		Signature and Date	
Authorized Employee Observed		Signature and Date	

Inspection Items		Yes	No
1	Does the authorized employee understand how/where to access the lockout/tagout procedure?	<input type="checkbox"/>	<input type="checkbox"/>
2	Was the equipment or system properly shut down at each hazardous energy source?	<input type="checkbox"/>	<input type="checkbox"/>
3	Did the authorized employee apply the appropriate control device (locks, devices, and tags) to each energy isolation device?	<input type="checkbox"/>	<input type="checkbox"/>
4	Did the authorized employee apply warning tags to each energy isolation device identifying their name, department or shop, and contact information?	<input type="checkbox"/>	<input type="checkbox"/>
5	Was a warning tag used in place of a lock? If so, was it obvious to anyone in the area that the equipment or system must not be started up?	<input type="checkbox"/>	<input type="checkbox"/>
6	Did the authorized employee properly control the hazardous energy?	<input type="checkbox"/>	<input type="checkbox"/>
7	Are the verification methods effective and complete prior to starting servicing and maintenance (i.e., attempt restart, drain/bleed, check gauges, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
8	Was the startup procedure effective and completed properly at the completion of servicing and maintenance?	<input type="checkbox"/>	<input type="checkbox"/>
9	Did the authorized employee observed understand their responsibilities under the procedure?	<input type="checkbox"/>	<input type="checkbox"/>
10	Were all steps in the procedure effective to safely shutdown and lockout/tagout hazardous energy to the equipment or system?	<input type="checkbox"/>	<input type="checkbox"/>
Results		Yes	No

<p>The lockout/tagout procedure is adequate and provides the necessary protection with no corrective actions needed. If no, please list the required corrective actions below.</p>	<input type="checkbox"/>	<input type="checkbox"/>
---	--------------------------	--------------------------

Procedure Review	Yes	No
<p>Has the lockout tagout procedure being inspected, and any associated changes or corrections, been reviewed with all other authorized employees?</p>	<input type="checkbox"/>	<input type="checkbox"/>

Signatures	Sign	Date
Inspector		
Authorized Employee Observed		
Supervisor (Review and Approval)		