**Oil and Gas Industry – Fall Protection Equipment Inspection Checklist**
**(For Training Purposes)**

**1. General Information**

* **Date of Inspection**: [Date]
* **Inspector Name**: [Name of Inspector]
* **Inspector Signature**: [Signature]
* **Location**: [Worksite Location]
* **Equipment/Harness ID**: [Unique ID or Serial Number of Harness]
* **Equipment Owner**: [Name or Department]

**2. Fall Protection Harness Inspection Checklist**

| **#** | **Item** | **Condition** | **Pass** | **Fail** | **Comments / Action Taken** |
| --- | --- | --- | --- | --- | --- |
| 1 | **Webbing Condition** | No frays, cuts, burns, or signs of wear | [ ] | [ ] | [ ] |
| 2 | **Webbing Stitches** | No loose, broken, or unraveling stitches | [ ] | [ ] | [ ] |
| 3 | **D-Rings (Front and Back)** | No cracks, deformations, or rust; moves freely | [ ] | [ ] | [ ] |
| 4 | **Chest Strap Adjustment** | Easy to adjust; securely fastens | [ ] | [ ] | [ ] |
| 5 | **Leg Strap Condition** | Free from fraying, cuts, or signs of damage | [ ] | [ ] | [ ] |
| 6 | **Buckle Condition** | No cracks or deformities; operates correctly | [ ] | [ ] | [ ] |
| 7 | **Harness Padding** | No tears or compression; retains form | [ ] | [ ] | [ ] |
| 8 | **Harness Attachment Points** | No sharp edges or defects; clearly marked | [ ] | [ ] | [ ] |
| 9 | **Fall Arrest Lanyard (if applicable)** | No frays, cuts, or damage; locking mechanism works | [ ] | [ ] | [ ] |
| 10 | **Carabiner Condition** | No cracks, corrosion, or excessive wear; locking mechanism works | [ ] | [ ] | [ ] |
| 11 | **Reflective Markings/Labels** | Clear and legible; not worn off or damaged | [ ] | [ ] | [ ] |
| 12 | **Elastic Shock Absorber (if applicable)** | No damage or stretching; performs correctly | [ ] | [ ] | [ ] |

**3. Functional Test (If Applicable)**

* **Test 1: D-ring Load Test**
	+ Attach a suitable load to the D-ring and check for any slippage, bending, or deformation.
	+ Pass: [ ] Fail: [ ]
	+ Comments: [ ]
* **Test 2: Leg Strap Fit and Adjustment Test**
	+ Adjust leg straps to ensure a snug, secure fit, without excessive looseness or tightness.
	+ Pass: [ ] Fail: [ ]
	+ Comments: [ ]
* **Test 3: Chest Strap Adjustment Test**
	+ Ensure the chest strap can be adjusted for proper positioning and does not interfere with movement.
	+ Pass: [ ] Fail: [ ]
	+ Comments: [ ]

**4. Additional Safety Checks**

* **Inspect Lanyard and Tie-Off Points**
	+ Ensure that lanyards and tie-off points are in good condition, securely attached, and free from corrosion or damage.
	+ Pass: [ ] Fail: [ ]
	+ Comments: [ ]
* **Inspect Rescue/Recovery Equipment** (If applicable)
	+ Ensure rescue or retrieval equipment is readily available and operational.
	+ Pass: [ ] Fail: [ ]
	+ Comments: [ ]

**5. Final Inspection Summary**

* **Pass/Fail Status of Harness**:
	+ Pass: Ready for use
	+ Fail: Remove from service (if fail, provide details in comments)
* **Additional Notes/Actions**:
[Include any further actions required, e.g., repairs, further inspection needed, or harness replacement.]

**6. Inspector Certification**

* **Inspector Name**: [Name]
* **Signature**: [Signature]
* **Date of Inspection**: [Date]
* **Next Scheduled Inspection**: [Date]

**7. Equipment Owner Acknowledgment**

By signing below, the equipment owner acknowledges that the fall protection harness has been inspected as per the requirements outlined in this checklist and is either approved for use or removed from service.

* **Owner Name**: [Name]
* **Signature**: [Signature]
* **Date**: [Date]

**8. Corrective Actions (If Any)**

If any items fail the inspection or require corrective action, the following steps must be taken:

| **#** | **Action Required** | **Responsible Person** | **Due Date** | **Comments** |
| --- | --- | --- | --- | --- |
| 1 | [Action Item] | [Name/Dept.] | [Date] | [Details] |
| 2 | [Action Item] | [Name/Dept.] | [Date] | [Details] |
| 3 | [Action Item] | [Name/Dept.] | [Date] | [Details] |

**9. Conclusion**

Routine inspection and maintenance of fall protection equipment are crucial for ensuring worker safety on the job. This checklist is an essential tool for ensuring all components of your fall protection harness are functioning correctly and free from defects.