

Logo	Gas Cutting Cylinder Set Inspection Checklist	Doc Ref #: XYZ/IMS/QHSE/F/00 Issue Date: DD-MM-YYYY Rev #: 00
	QHSE Forms	
	Organization Name	

Inspection Form #: _____

Equipment ID		Project Name	
Manufacturer		Project Ref #	
Inspected On		Re-Inspect On	
Inspected By		Designation	
Owner	Company <input type="checkbox"/> Contractor <input type="checkbox"/> Sub - Contractor <input type="checkbox"/> Others <input type="checkbox"/>		

S/#	Description	Yes	No	Remarks
1. Physical Appearance				
1	The cylinder is in good condition?			
2	The carrier trolley is in good condition?			
3	The gauges are in good condition and fully functional?			
4	The valves are in good condition, free of rust and damage?			
5	The valve protection caps are available?			
6	The cylinder set is placed in upright position?			
7	Regulator is free of from all kind of defects?			
8	Flashback arrestor is provided with the cylinder set?			
9	Hoses are in good condition with color coding?			
10	The hose joints are free of defect, properly attached?			
11	Cutting torch is in good condition?			
12	Both cylinders are color coded, Oxygen (black) and Fuel (red)?			

2. Final Remarks				
Equipment is fit for job?	Partially fit for job		Fully fit for job	

Prepared By	Approved By