

Logo	Grit & Sand Blasting 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	Hopper is made of sound quality material?			
2	Hopper pressure gauge is working properly?			
3	Hopper's Pressure rating is mentioned on visible point?			
4	Conductive hose made of sound material is used?			
5	Mandatory coupling clip Is available on connection point?			
6	Blast nozzle is made of sound material as per requirements?			
7	Operator controls are easily accessible?			
8	Operator is provided with approved PPEs & Breathing apparatus?			
9	Emergency stop button is available?			
10	Electrical wiring is insulated and in good condition?			

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

Prepared By	Approved By