Logo	General Environment Inspection Checklist	Doc Ref #: XYZ/IMS/QHSE/F/00 Issue Date: DD-MM-YYYY Rev #: 00 Page 1 of 2
	QHSE Forms	
	Organization Name	

Checklist Sr. #		Area Supervisor	
Inspected By		HSE Officer	
Date & Time		HSE Manager	

Tick (✔) the correct option against every criterion.

S/#	Description	Yes	No	Remarks
Workplace Condition				
1	The workplace is neat and clean, free of debris, and discarded material?			
2	The workplace surface is free of lubricants?			
3	The workplace is sanitized on regular basis?			
Chemical Storage				
1	Chemical containers (drums, tanks, gallons) are in good condition?			
2	Chemical containers (drums, tanks, gallons) free of spillage, dripping?			
3	Chemical containers (drums, tanks, gallons) free of physical damage?			
4	Chemical containers (drums, tanks, gallons) properly sealed, labelled?			
5	Chemical containers secured with secondary containment measures?			
6	Integrity test performed on tanks, gallons, drums draining etc.?			
Fuel Storage				
1	Fuel storage is free of flammable material and fire ignition sources?			
2	Fuel storage containers are free of any damage, e.g., rust, corrosion?			
3	Fuel storage container is properly sealed and labelled?			
4	Fuel storage area provided with secondary containment e.g., bunding?			
5	Fuel storage container passed Integrity test?			
Solid Waste Storage				
1	Solid waste is stored in a proper container free of physical damage?			
2	Solid waste storage containers are properly labelled?			
3	Solid waste is discarded properly according to environment legal laws?			
4	Waste storage area is properly guarded and labelled?			
Liquid Waste Storage (Oils, Discarded Grease, Lubricants)				
1	Used lubricants, fuels, greases, oils are stored in the safe container?			
2	All of the containers are free of damage, leaks, dripping problems?			

Tick (✔) the correct option against every criterion.

S/#	Description	Yes	No	Remarks
3	Containers and storage area properly labelled, marked & discarded safely?			
4	Secondary containment provided & container integrity test passed?			
Washing Area & Waste Water Treatment System				
1	Washing area is free of any kind of hazardous material e.g., acid?			
2	Is there any spill or overflow from the bay?			
3	Treatment system is provided service in functional, without overflow?			
4	Is there any spillage from the draining, dumping area due to overflow?			
Battery Storage Area				
1	Batteries stored in a well-ventilated area, in a proper manner?			
Parking Area				
1	Parking area is free of spills, leakages, cleaned properly?			
Emergency Area				
1	Emergency Area free of chemicals, liquids, flammable material storage?			
2	Emergency Area free of liquid spillage and leakage?			

Observations	Recommendation

Inspector	HSE Representative	Approved By
Name:	**Name**:	**Name**:
Designation:	**Designation**:	**Designation**:
Signature:	**Signature**:	**Signature:**