

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

<b>Checklist Sr. #</b>		<b>Area Supervisor</b>	
<b>Inspected By</b>		<b>HSE Officer</b>	
<b>Date &amp; Time</b>		<b>HSE Manager</b>	

Tick (✓) the correct option against every criterion.				
S/#	Description	Yes	No	Remarks
<b>Workplace Condition</b>				
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?			
<b>Chemical Storage</b>				
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.?			
<b>Fuel Storage</b>				
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?			
<b>Solid Waste Storage</b>				
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?			
<b>Liquid Waste Storage (Oils, Discarded Grease, Lubricants)</b>				
1	Used lubricants, fuels, greases, oils are stored in the safe container?			
2	All of the containers are free of damage, leaks, dripping problems?			

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<b>Tick (✓) the correct option against every criterion.</b>				
S/#	Description	Yes	No	Remarks
3	Containers and storage area properly labelled, marked & discarded safely?			
4	Secondary containment provided & container integrity test passed?			
<b>Washing Area &amp; Waste Water Treatment System</b>				
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?			
<b>Battery Storage Area</b>				
1	Batteries stored in a well-ventilated area, in a proper manner?			
<b>Parking Area</b>				
1	Parking area is free of spills, leakages, cleaned properly?			
<b>Emergency Area</b>				
1	Emergency Area free of chemicals, liquids, flammable material storage?			
2	Emergency Area free of liquid spillage and leakage?			
<b>Observations</b>		<b>Recommendation</b>		

Inspector	HSE Representative	Approved By
<b>Name:</b>	<b>Name:</b>	<b>Name:</b>
<b>Designation:</b>	<b>Designation:</b>	<b>Designation:</b>
<b>Signature:</b>	<b>Signature:</b>	<b>Signature:</b>