

Attachment B

Safety and Health Inspection Checklist for Office Areas

Fire Protection/Emergency Procedures:

- Are fire extinguishers located in the work area? ___ Yes ___ No ___ N/A
- Are the areas around fire extinguishers kept clear of materials & equipment? ___ Yes ___ No ___ N/A
- Are exit routes unobstructed? ___ Yes ___ No ___ N/A

Computer Use:

- Are computer workstations properly set up, according to ergonomic guidelines (computer keyboard, monitor, mouse position and chairs positioned properly? ___ Yes ___ No ___ N/A

Telephone use:

- For extended telephone use, is employee using a telephone cradle, headset or speaker phone?
___ Yes ___ No ___ N/A

Filing:

- Are step stools available for accessing higher areas? ___ Yes ___ No ___ N/A
- Are filing drawers kept closed when not in use? Only one drawer open at a time? ___ Yes ___ No ___ N/A

Storage:

- Are shelves and filing cabinets bottom-loaded (not top-heavy)? ___ Yes ___ No ___ N/A
- Are tops of cabinets and overhead shelves free from objects that can fall and cause injury?
___ Yes ___ No ___ N/A
- Are storage shelves and cabinets located so they will not fall on employees or block aisles/exits?
___ Yes ___ No ___ N/A
- Are step ladders/stools available for accessing high areas? ___ Yes ___ No ___ N/A
- Are storage areas kept clean and free from tripping hazards? ___ Yes ___ No ___ N/A

Electrical

- Are extension cords being used properly (unplugged at the end of the day, not used in place of permanent wiring, not daisy-chained)? ___ Yes ___ No ___ N/A
- Are appliances plugged directly into outlets? ___ Yes ___ No ___ N/A
- Are electrical cords in good condition (no cuts, gouges, exposed wiring)? ___ Yes ___ No ___ N/A
- Are cords kept out of aisleways? ___ Yes ___ No ___ N/A

Lifting:

- Are employees getting help to move heavy objects? ___ Yes ___ No ___ N/A
- Are employees lifting bulky, heavy objects properly (back straight, knees bent, etc.)? ___ Yes ___ No ___ N/A
- Are carts, hand trucks or other equipment available to move heavy items? ___ Yes ___ No ___ N/A

Work Postures/Body Positions

- Are employees generally following ergonomic guidelines: computer keyboard, monitor, mouse position and chairs positioned properly? ___ Yes ___ No ___ N/A

Discrepancies:

For all "No" answers above, corrective action must be taken. Forward a copy of the inspection checklist to Verdant management.

Date of Inspection: _____

Conducted by: _____