

FALL PROTECTION DAILY/FORMAL INSPECTION LOG

Model No: _____
 Serial No: _____
 Date Made: _____

Inspector: _____
 Inspection Date: _____
 PASS/FAIL: _____

INSP. POINT	DESCRIPTION	QTY/H	PTY	COND. (b)	OVERALL ASSESS.(b)	COMMENTS
<i>FABRIC PARTS</i>						
	WEBBING (STRAPS)					
1	Shoulder	2	1			
2	Shoulder strap retainer	1	1			
3	Shoulder ring strap	2	1			
4	Thigh	2	1			
5	Sub-pelvic	1	1			
6	Tool belt support (a)	2	2			
	STITCHING					
7	Shoulder ring strap	4	1			
8	Shoulder strap tip	1	1			
9	Shoulder strap retainer	2	1			
10	Shoulder strap reinforce.	2	1			
11	Buckle strap	2	1			
12	Thigh strap	2	1			
13	Thigh strap edges	4	2			
14	Sub-pelvic strap	4	1			
<i>METALLIC PARTS</i>						
	D-RINGS/OVAL RINGS					
15	Back	1	1			
16	Hip	2	1			
17	Chest	1	1			
18	Shoulder	2	1			
	BUCKLES/ADJUSTERS/GROMMETS					
19	Adjuster, torso sizing	1	1			
20	Buckle, tongue	2	1			
21	Buckle, friction	2	1			
22	Buckle, Qwik-Fit	2	1			
23	Grommets, Thigh strap	16	1			
<i>PLASTIC PARTS</i>						
24	Back D-ring locator	1	1			
25	Strap collar	3	1			
26	Labels	5	1			
27	Tool belt support clips (a)	2	2			

(a) Optional item.

(b) Optional simplified PASS/FAIL inspection format: Whenever an acceptable condition is found, the entry in the COND. and OVERALL ASSESS. columns may be left blank. Whenever a defective condition(s) is found enter "FAIL." The inspection may end upon detection of a single Priority 1 defect or three Priority 2 defects.