



SAFEWAZE

INSPECTION FORM

LANYARDS

Manufacturer: _____

Model Number: _____

Description: _____

Serial Number: _____

Lot Number: _____

Date of Manufacture: _____

Company: _____

Name of Inspector: _____

Signature: _____

Date of Inspection: _____

In-Service Date: _____

Lanyard

☐ Single Leg

☐ Cable

☐ Internal Shock Absorber

Configuration:

☐ Dual Leg

☐ Web

☐ External Shock Absorber

☐ Non-Shock Absorber

LABELS & MARKINGS

	PASS	FAIL	NOTE
Label (<i>Intact and Legible</i>)	☐	☐	☐
Appropriate ANSI / OSHA / CSA Markings	☐	☐	☐
Inspections are Current / Up-to-Date	☐	☐	☐
Date of First Use	☐	☐	☐

CONNECTORS

	PASS	FAIL	NOTE
Connector (<i>Self-Closing and Locking</i>)	☐	☐	☐
Hook Gate / Rivets	☐	☐	☐
Corrosion / Pitting / Nicks	☐	☐	☐

MATERIAL (*Web or Cable*)

	PASS	FAIL	NOTE
Broken / Missing / Loose Stitching	☐	☐	☐
Termination (<i>Stitch, Splice, or Swage</i>)	☐	☐	☐
Webbing Length	☐	☐	☐
Cuts / Burns / Holes	☐	☐	☐
Paint Damage	☐	☐	☐
Cable Separating / Bird-Caging	☐	☐	☐

SHOCK PACK (*If Applicable*)

	PASS	FAIL	NOTE
Cover / Shrink Tube (<i>Don't Cut or Remove</i>)	☐	☐	☐
Damage / Fraying / Broken Stitching	☐	☐	☐
Impact Indicator (<i>Signs of Deployment</i>)	☐	☐	☐

NOTES

