



MEWPs Worksite Inspection		
Company Name:		Date:
Site Location:		
Inspection Location:		
Completed by:		
Hazard Present	Yes/No ✓ / X	Control Measures/Comments
1 Drop-off holes.		
2 Slopes.		
3 Bumps/Floor obstructions.		
4 Debris.		
5 Overhead obstructions.		
6 Electrical conductors.		
7 Hazardous atmospheres/locations.		
8 Support surface conditions.		
9 Wind and weather conditions.		
10 Presence of personnel/other equipment/traffic.		
11 Other*		