

Date: \_\_\_\_\_

Inspector(s): \_\_\_\_\_

Job Title: \_\_\_\_\_

Chair: \_\_\_\_\_

Signature: \_\_\_\_\_



**THOMPSON RIVERS UNIVERSITY**

**HORTICULTURE & OBSERVATORY INSPECTION CHECKLIST**

Note: This list is not exhaustive. Specialized workplaces are encouraged to add their own items. **Answering 'no' to any of the following questions indicates a need for corrective action to be taken.**

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
<b>1.0</b>	<b><u>HORTICULTURE/GREENHOUSE</u></b>					
1.01	Are floors level and free of dips?					
1.02	Are hoses rolled up or kept off to the side of walkways?					
1.03	Are tables sturdy?					
1.04	Is plant storage stable?					
1.05	Are power outlets protected from water?					
1.06	Are hanging items in the back room secure?					
1.07	Are all chemical products used properly stored and labeled?					
1.08	Is a ladder available to retrieve items stored up high?					
1.09	Are items on shelves a safe distance away from any heat sources?					
1.10	Is the shelving unit in good condition and sturdy?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
1.11	Are all items properly stored?					
1.12	Are there guards on trimming & cutting equipment?					
1.13	Are people properly trained on how to use this equipment?					
1.14	Is appropriate PPE such as hearing protection and face shields available for using the equipment?					
1.15	Are machines in the machine shed properly stored?					
1.16	Are users of these machines properly trained?					
1.17	Is appropriate PPE available for the use of these machines?					
<b>2.0</b>	<b><u>HORTICULTURE / HOUSE</u></b>					
2.01	Are employees aware of emergency procedures, telephone numbers and evacuation routes?					
2.02	Are ergonomic issues being addressed for people using computers? (If no, refer to the Ergonomic section on the OH&S webpage).					
2.03	Is lighting adequate?					
2.04	Is ventilation adequate?					
2.05	Is temperature adequate?					
2.06	Do noise levels appear comfortable?					
2.07	Is working space adequate?					
2.08	Is carpeting in good condition and not badly worn or torn?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
2.09	Does the office arrangement allow for easy exit under emergency conditions?					
2.10	Are items on shelves not crowded, piled too high, or protruding over the edge?					
2.11	Are aisles clear and not obstructed?					
2.12	Are drawers kept closed except when in use?					
2.13	Are fire extinguishers available, accessible and inspected annually?					
2.14	Is the office kept clear of trash and are recycle bins removed promptly?					
2.15	Are wall mounted cabinets, stand –alone bookcases, and wall mounted shelves secured to building surfaces to prevent their falling over?					
2.16	Are power cords and outlets in good condition?					
2.17	Do windows and doors close properly?					
2.18	Are cleaning & office chemicals stored properly?					
<b>3.0</b>	<b><u>OBSERVATORY</u></b>					
3.01	Does lighting work properly and are fixtures in good condition?					
3.02	Does emergency lighting work properly?					
3.03	Does the door close properly?					
3.04	Is equipment in good condition?					
3.05	Are floor covers still in place?					

		YES	NO	COMMENTS	ACTION TYPE	DATE ACTION COMPLETED
3.06	Is tape covering the lips on the floor covers in place?					
3.07	Is the tape in good condition?					