

Eyewash Station Weekly Checklist

Location: _____

1. Ensure area directly in front of the eyewash is accessible and free of clutter.
2. Ensure eyewash sign has been affixed in plain view above the eyewash.
3. Ensure protective caps or shields located over the eyewash outlets.
4. Ensure protective caps or shields do not interfere with the flow of water from the eyewash.
5. Run eyewash for 30 seconds every week then date and initial checklist below.
6. Maintenance problems? Report promptly to extension HSC 419/383-5353 or MC 419/530-1000.

Week	Month/Year ____ / ____ :	Inspector
1		
2		
3		
4		
5		

Shower Station Weekly Checklist

Location: _____

1. Ensure area directly in front of the Safety Shower is accessible and free of clutter.
2. Ensure Safety Shower sign has been affixed in plain view above the eyewash.
3. Run Safety Shower for 30 seconds every week then date and initial checklist below.
4. Maintenance problems? Report promptly to extension 5353.

Week	Month/Year ____ / ____ :	Inspector
1		
2		
3		
4		
5		

RETAIN COMPLETED FORMS FOR THREE YEARS Obtain additional blank forms at:

http://www.utoledo.edu/depts/safety/docs/Misc/Eyewash_Station_Weekly_Checkli.pdf

COMMENTS: