Management Walkaround Clean-up Checklist

Location: ___________________  Person in Charge of Clean-up ___________________

☐☐ General Safety
☐ Emergency information placards at entry doors are up to date.
☐ Safety glasses (or laser eyewear) are available at shop/lab entrances.
☐ Aisles, stairwells, and entry/exit areas are clear to allow egress in an emergency.
☐ Access to emergency eyewash/showers, electrical panels, and fire extinguishers is clear.
☐ “Drop, hold and cover” spaces are clear.
☐ Lab/shop benches and desks are neat, with adequate clear working space.
☐ Food areas are clean.

☐☐ Removal of Unneeded Materials and Equipment
☐ Recyclable materials (metals, paper, etc.) moved to recycling bins.
☐ Excess equipment moved to staging areas.
☐ Trash placed in bins.

☐☐ Electrical Equipment Inspected/Labeled
☐ Unneeded equipment has been taken out of service.
☐ Equipment with obvious safety hazards has been identified and taken out of service.
☐ Action taken to initiate repair of needed Failed or Conditionally Approved equipment.

☐☐ Seismic Inspection Completed
☐ Items that need anchoring (anything taller than 4 feet) have been identified.
☐ Heavy overhead items have been moved or restrained.

☐☐ Sharps
☐ Sharps needed for future use are stored with blades covered.
☐ Unneeded sharps have been disposed in sharps containers.

☐☐ Chemicals
☐ Primary (original from manufacturer) chemical containers have CMS Barcodes.
☐ Liquid chemicals are in containment trays.
☐ Secondary containers (squeeze bottles) are labeled with contents and hazard.
☐ Unwanted chemicals have been discussed with SAA Manager.

☐☐ Gas Cylinders and Cryogens
☐ Cylinders/dewars are appropriately restrained.
☐ Cylinders and dewars are labeled with contents and hazard.
☐ Unwanted cylinders/dewars have been reported to the Division Safety Coordinator.

Management Sign-Off _______________________________  Date ______________