Rowan University Academic & Research Operations Lockout/Tagout Procedure Inspection Form

Department:	Building:	Date:					
Location/Area:							
Machine/Equipment ID Information:							
Inspector Name:							
Authorized Individual(s) Involved:							
Lockout/Tagout Application		Y	ES	NO	N/A		
1) Have all Affected Individuals been notified that the							
machine/equipment was going to be Locked Out/Tagged Out?							
2) Have all hazardous energy sources and energy isolating devices been		en					
properly located and identified?							
3) Was the machine/equipment shutdown procedure performed correctly?							
4) Have all energy isolating devices been operated so that hazardous							
energy sources are isolated?	r operated so that hazardous						
5) Have Lockout/Tagout devices been placed on energy isolation devices?							
6) Were the correct Lockout/Tagout devices used for the application?							
7) Has any stored energy been dissipated, restrained, or rendered safe?							
8) Has the machine/equipment been tested following the LOTO							
procedure to verify effectiveness of the LOTO application?							
9) Have all equipment/machine controls been returned to the off/neutral							
position after completing LOTO verification?							
10) Was the machine/equipment LOTO procedure properly followed?							
Lockout/Tagout Removal			es	No	N/A		
11) Was the work area inspected to ensur							
guards were reinstalled; all interlocks/safety devices were operational;							
and that the area was clear of personnel and hazards prior to							
reenergizing equipment?	•						
12) Were all Affected Individuals informed that the machine/equipment							
was being returned to service?							
13) Were all LOTO devices removed by the Authorized Individuals who							
applied them?							
14) Were all energy isolation devices open	rated to restore						
machine/equipment energy?							
General Lockout/Tagout	Requirements	Y	es	No	N/A		
15) Does the LOTO procedure provide app	propriate protection to all						
Affected and Authorized Individuals?							

LOTO Procedure Inspections records are to be kept on file with the department responsible for the machinery/equipment. Upload completed inspection forms to the Documents section of BioRAFT.						
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Inspector Name:	Signature:	Date:				
be required.						
I certify that a LOTO Procedure Inspection has been completed. All individuals involved in the procedure have been informed of the results of this inspection and any follow-up actions that may						
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Comments:						
corrective actions. Utilize the space in the Comments section below to provide details. Comments:						
Note: Any "NO" answers to the inspection questions on this form must be addressed with						
responsibilities under the LOTO p						
17) Were Affected Individuals able to						
16) Were Authorized Individuals able responsibilities under the LOTO p	• •					
16) Wang Authorized Individuals abla	to optiofostopily symlain their					