

RECORD OF SAFETY HARNESS INSPECTIONS

Manufacturer: _____

Model: _____ Type: _____

Serial Number: _____ Date of Manufacture: _____

Date	Inspected By:	Condition	Comn

CHECK LIST: At each inspection check the following items:-

WEBBING:	: No colour variation, little or no mechanical/chemical
STITCHING:	: Must be 100% intact
METAL COMPONENTS:	: All in good condition
LANYARD:	: All parts in good condition
IF IN DOUBT - REJECT AND REPLACE	

A37

Comments

cal/chemical damage
