APPENDIX C: Periodic Inspection Form	
Facility:	Equipment ID:
Building:	Designated Authorized Employee (Inspector):
Campus Location:	Date:
Authorized Employee Signature(s):	Affected Employee Signature(s):
1	1
2	2
3	3
4	4
5	5
1. Were all affected employees notified of the work to be performed? Specify method of communication. <i>For Tagout Only Operation:</i> If affected employees are present during this Periodic Inspection, did they understand their responsibilities?	
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2. Following the steps in the documented LOTO procedure, did the LOTO procedure bring the energy level to a zero state?	
If the energy level was not brought to a zero energy state, then stop this inspection. Follow the established departmental process to have the procedure updated and required retraining provided.	
3. Did each authorized employee know which energy source(s) to isolate?	
4. Did each authorized employee test the energy isolating device (i.e. disconnect) to be sure it cannot be moved to the "ON" position?	
5. Prior to starting work on the machine or equipment that was locked out, did each authorized employee verify that the machine or equipment was de-energized? What method was used to verify?	
6. Was the energy isolating device returned to the "OFF" or "Neutral" position following the verification and prior to performing servicing and maintenance?	
7. Did each authorized employee affix his or her personal lock and tag to the energy isolating device(s)? If not, why not?	
8. Did each authorized employee maintain full possession of his or her key(s) for all personal lockout devices?	
9. Did each authorized employee understand his or her responsibilities under the LOTO procedure being inspected?	
10. Inspector's overall assessment:	
Action Items/Other Observations:	