# Inspection Report Summary

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|---|---|
| **Department:** | Sand Core Cell |
| **Machine:** | CRANE-6-MONO |
| **Pass / Fail:** | 58 % Passed / 0 % Failed |
| **Time to Audit:** | 2 minutes |
| **Auditor:** | — |
| **Inspected Date:** | Aug 11, 2025 |

# Inspection Report

**Facility:** Custom Castings

**Department:** Sand Core Cell

**Machine:** CRANE-6-MONO

**Model Number:** 1/4 Ton Monorail

**Manufacturer:** Century Cranes

**Serial Number:**

## Machine Specific

| # | Question | Corrective Action | Result |
|---|---|---|---|
| 1 | Safe Work Procedure posted? | | **Pass** |
| 2 | Are all Emergency Stops clearly marked and functioning properly? | | **Pass** |

## Department Specific

| # | Question | Corrective Action | Result |
|---|---|---|---|
| 1 | The floors are clear of debris, loose material and trip hazards. | | **Pass** |
| 2 | The floors are not slippery or wet and there are no spills. | | **Pass** |
| 3 | Floors around furnaces and equipment are in good condition. | | **N/A** |
| 4 | Aisle are clear, no obstructions. | | **Pass** |
| 5 | Exits are clear and functioning. | | **Pass** |
| 6 | Fire extinguishers are clear of obstruction and are inspected regularly. | | **N/A** |
| 7 | Fire blanket(s) are in their holders and instructions are legible. | | **N/A** |
| 8 | Electrical panels have one meter clearance and are free of clutter. | | **N/A** |
| 9 | Chemical substances are properly labelled. | | **N/A** |
| 10 | Required Personal Protective Equipment (PPE) is available and being worn. | | **Pass** |
| 11 | Crane(s) and/or forklift(s) in good working order. Daily inspection log up to date. | | **Pass** |
| 12 | All equipment in good working order with proper guarding. | | **Pass** |
| 13 | Compressed gas cylinders clean, stored safely and secure. | | **N/A** |
| 14 | Extension cords and torch hoses do not pose a tripping hazard. | | **N/A** |
| 15 | There are no leaks; (oil, gas, water or compressed air). | | **Pass** |
| 16 | Storage shelves and are in good condition and are loaded only to capacity. | | **N/A** |
| 17 | HVAC and exhaust system in working order and being used. | | **Pass** |

**Safety Rep Signature:**

**Supervisor Signature:**