

Inspection Report Summary

Department:	Press Dept
Machine:	35 Flexo - Load Infeed
Pass / Fail:	94 % Passed / 6 % Failed
Time to Audit:	3 minutes
Auditor:	—
Inspected Date:	Oct 17, 2025

Inspection Report

Facility: Cascades Winnipeg

Department: Press Dept

Machine: 35 Flexo - Load Infeed

Model Number:

Manufacturer:

Serial Number:



Machine Specific

Activity/Tasks	Hazards	Corrective Action	Pass/Fail	Severity	Exposure	Avoidance	Total	Current Safeguards	Recommended Improvements
Operational or incidental access while making adjustments, unjamming, adjusting or minor cleaning at the pallet stacker	Automated motion causing pinch, unexpected movement and falling object hazard		Pass	2	2	1	PR2 4	Manual controls (hold to run), ZES Lockout procedures	
Operational or incidental access while making adjustments, unjamming, adjusting or minor cleaning at the pallet sweeper	Crush hazard, shear hazard, and caught between hazard		Pass	3	2	1	PR2 6	Manual controls (hold to run), ZES Lockout procedures	Perimeter guarding around pallet sweep
Operational or incidental access while making adjustments, unjamming, adjusting or minor cleaning at the minor infeed conveyor	Automated unexpected motion possible falling object crush hazard, entanglement, fire, pinch points, caught between		Pass	3	2	1	PR2 6	Manual controls (hold to run), ZES lockout procedures; cleaning policy	
Operational or incidental access while making adjustments, unjamming, adjusting or minor cleaning at the main infeed conveyor	Fall from height, pinch points, automated movement caught between, falling object crush hazards, fire		Pass	3	2	1	PR2 6	Manual controls, ZES lockout procedures, walkplates	

#	Question	Corrective Action	Pass/Fail
1.	Safe Work Procedure posted?		Pass
2.	Are all Emergency Stops clearly marked and functioning properly?		Pass

Department Specific

#	Question	Corrective Action	Pass/Fail
1.	Are Emergency Exits clear and unobstructed?		Pass
2.	Are Emergency Exits clearly identified?		Pass
3.	Are Fire Extinguishers/Fire Control Equipment clearly visible and identified?		Pass
4.	Have the Fire Extinguishers/Fire Control Equipment been recently inspected?	Fires extinguishers not checked for month of September Assigned To: Iqbal Chowdhury	Fail
5.	Are the Eyewash Stations working and clean, and unobstructed?		Pass
6.	Are all the sprinkler heads in your location unobstructed?		Pass
7.	Is Access to the Electrical Panels clear and unobstructed?		Pass
8.	Are carts in good condition?		Pass
9.	Is the lighting all functioning properly and adequate for the area?		Pass
10.	Are noise levels adequate with PPE, any high impulse or continual noise?		Pass
11.	Is the temperature in the area comfortable to work in?		Pass
12.	Are all air quality systems working (dust, fumes or vapour present)?		Pass
13.	Is the housekeeping (floor and work surfaces) sufficient for the area?		Pass
14.	Are the employees using their PPE?		Pass
15.	Are all controlled substances labelled in accordance with GHS standards?		Pass

Safety Rep Signature:

A handwritten signature in black ink, enclosed in a rectangular box. The signature is stylized, starting with a large loop and ending with a horizontal stroke.

Supervisor Signature:

A handwritten signature in black ink, enclosed in a rectangular box. The signature is stylized, featuring a large 'S' and a 'U'.