

# Inspection Report Summary

|                 |                           |
|-----------------|---------------------------|
| Department:     | Woodworking               |
| Machine:        | Router Table              |
| Pass / Fail:    | 67 % Passed / 33 % Failed |
| Time to Audit:  | 2 minutes                 |
| Auditor:        | Idongesit Inwang          |
| Inspected Date: | May 20, 2026              |

# Inspection Report

**Facility:** Westdale School

**Department:** Woodworking

**Machine:** Router Table

**Model Number:**

**Manufacturer:** Shape FX

**Serial Number:**

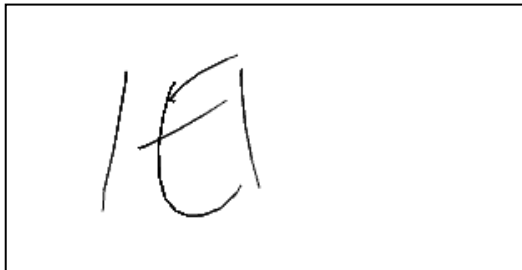


## Machine Specific

| Activity/Tasks     | Hazards                               | Corrective Action                                                                                                                                                 | Pass/Fail | Severity | Exposure | Avoidance | Total | Current Safeguards                   | Recommended Improvements |
|--------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|----------|-----------|-------|--------------------------------------|--------------------------|
| Operate machine    | Entangle, crush in power transmission |                                                                                                                                                                   |           | 2        | 2        | 2         | PR18  | Fixed guard                          |                          |
| Third party access | Laceration, amputation from tooling   |                                                                                                                                                                   |           | 2        | 2        | 2         | PR18  | Rear guard, hazard markings on floor |                          |
| Shape part         | Laceration, amputation from tooling   | 2026 Inspection - Remove 1/2 inch of shield to allow for easy moving of part<br> | Fail      | 2        | 2        | 2         | PR18  | Shield to cover tooling              |                          |

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

**Safety Rep Signature:**

A rectangular box containing a handwritten signature. The signature consists of the letters 'J' and 'E' written in a cursive, stylized manner. The 'J' is on the left and the 'E' is on the right, with a horizontal line connecting them.