

Inspection Report Summary

Department:	Tube Machining
Machine:	SMT WC 84 (M227)
Pass / Fail:	100 % Passed / 0 % Failed
Time to Audit:	13 minutes
Auditor:	Eugenio Reyes
Inspected Date:	May 21, 2026

Inspection Report

Facility: Burmac

Department: Tube Machining

Machine: SMT WC 84 (M227)

Model Number: SL 4500L

Manufacturer: SMT

Serial Number: 18L470038



Machine Specific

Activity/Tasks	Hazards	Corrective Action	Pass/Fail	Severity	Exposure	Avoidance	Total	Current Safeguards	Recommended Improvements
Cut Part	Entanglement, laceration - reaching into machine		Pass	3	2	2	PR1 12	Interlocked doors, full enclosure	Interlock doors, full enclosure, all safeguarding controls wired through a safety relay.
Remove swarf	Pinch or drawn in by swarf conveyor.		Pass	2	2	2	PR1 8	Fully guard swarf conveyor.	
Load Part	Entanglement, crush - reaching into machine		Pass	3	2	2	PR1 12	interlock doors,	
Unload Part	entanglement, crush - reaching into machine		Pass	3	2	2	PR1 12	interlock door	

#	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?		Pass
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:



Supervisor Signature:

