

Inspection Report Summary

Department:	Pattern Shop
Machine:	First Vertical Mill
Pass / Fail:	100 % Passed / 0 % Failed
Time to Audit:	—
Auditor:	Karanvir Singh
Inspected Date:	May 29, 2026

Inspection Report

Facility: Winkler

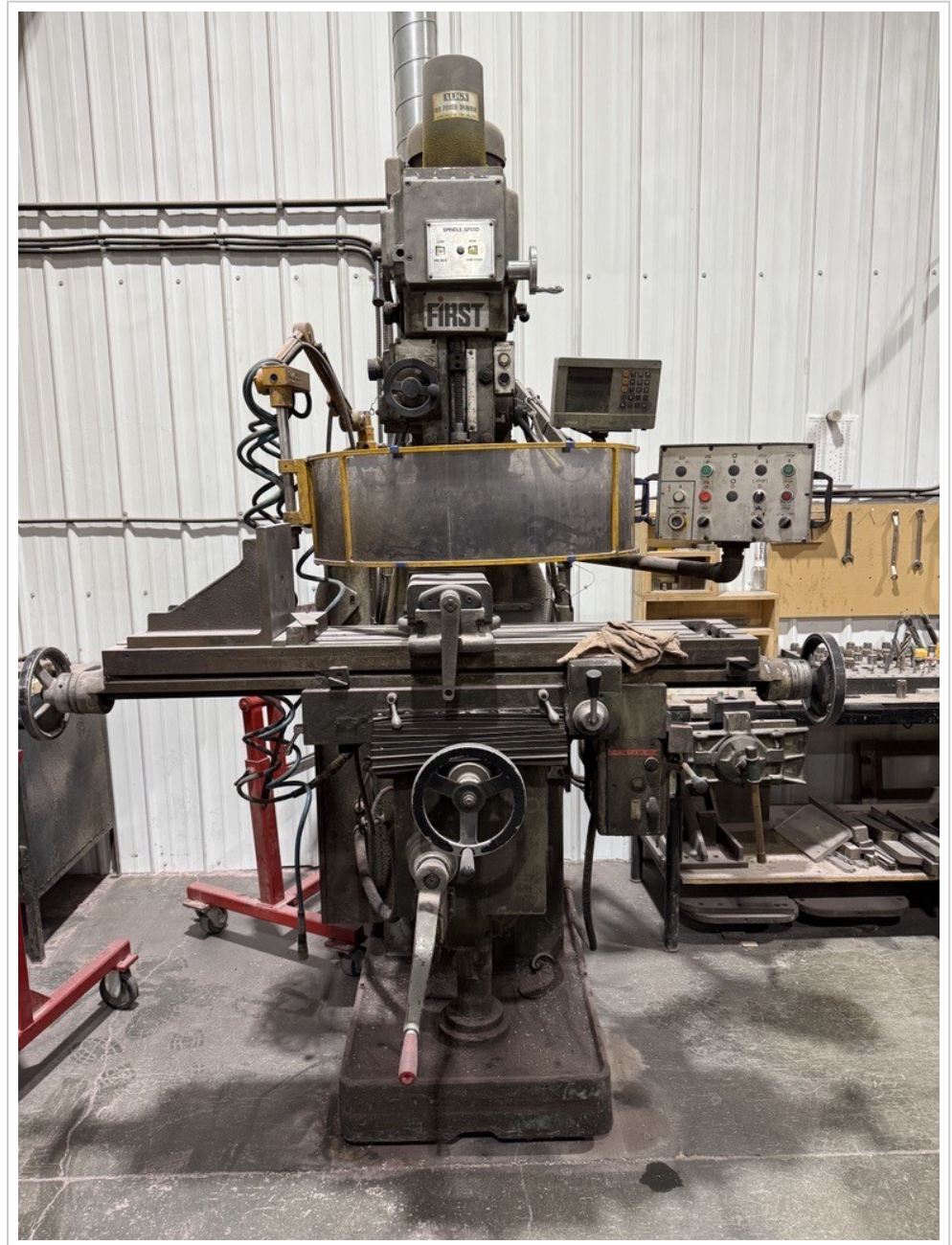
Department: Pattern Shop

Machine: First Vertical Mill

Model Number: LC-20VS3

Manufacturer: First

Serial Number: 71101387 M-0004-00



Machine Specific

Activity/Tasks	Hazards	Corrective Action	Pass/Fail	Severity	Exposure	Avoidance	Total	Current Safeguards	Recommended Improvements
Mill Parts	Entanglement in rotating spindle and tool. Laceration or amputation by tool.		Pass	2	1	1	PR4 2	Awareness guard around spindle. Bellows over table movement.	
Walk Around Machine	Entanglement in rotating spindle and tool. Laceration or amputation by tool		Pass	2	1	1	PR4 2	Located against wall restricts access.	
Mill Parts	crush and entangle-power transmission		Pass	2	1	1	PR4 2	fixed guard	

#	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?		N/A
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:

