

Inspection Report Summary

Department:	No Bake Molding
Machine:	Flow Coat Tilt Table #7293
Pass / Fail:	100 % Passed / 0 % Failed
Time to Audit:	2 minutes
Auditor:	Willi Fast
Inspected Date:	Aug 19, 2026

Inspection Report

Facility: Winkler

Department: No Bake Molding

Machine: Flow Coat Tilt Table #7293

Model Number: N/A

Manufacturer: Home Made

Serial Number: 7293



Machine Specific

Activity/Tasks	Hazards	Corrective Action	Pass/Fail	Severity	Exposure	Avoidance	Total	Current Safeguards	Recommended Improvements
Point of Operation	Crush in rotating table		Pass	3	2	1	PR2 6	Fixed guard at bottom but possible to reach or climb over	Install an interlocked door or light curtain to restrict access from the front
Point of Operation	Crush in rotating table		Pass	3	2	1	PR2 6	Fixed guard at bottom but possible to reach or climb over	Perform a task-based risk assessment to determine all hazards and required controls
Third Party Protection	crush in rotating table		Pass	3	2	1	PR2 6	Perimeter fence across rear and sides	
Power Transmission	crush and entangle		Pass	3	2	1	PR2 6	fixed guarding	
Other Hazards	N/A		N/A	3	2	1	PR2 6	N/A	

#	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?		N/A
7.	Is Access to the Electrical Panels clear and unobstructed?		Pass
8.	Are carts in good condition?		N/A
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

Supervisor Signature:

