



Auto Repair Shop Safety Inspection Checklist Template

 Show only Checklist

Display Style
Default 

General Shop Condition

Overall cleanliness, organization, and general safety of the workspace.

Overall Cleanliness Rating (1-10)

Enter a number...

Debris Present?

☐ Yes

☐ No



Describe any observed clutter or disorganization:

Write something...

Walkways Clear?

☐ Yes

☐ No

Describe any obstructions to walkways:

Write something...

Tool Storage Organized?

☐ Yes

☐ No

Number of visible tripping hazards:

Enter a number...

Fire Safety

Inspection of fire extinguishers, alarms, and emergency exits.

Last Fire Extinguisher Inspection Date

Fire Extinguisher A - PSI Reading

Fire Extinguisher B - PSI Reading

Fire Extinguisher A - Condition

- ☐ Good
- ☐ Needs Service
- ☐ Damaged

Fire Alarm System Status

- ☐ Operational
- ☐ Needs Maintenance
- ☐ Not Operational

Last Fire Drill Date

Enter date...

Comments on Fire Safety Concerns

Write something...

Hazardous Materials

Proper storage, labeling, and handling of chemicals and fluids.

Solvent Storage: Compliant?

- ☐ Yes
- ☐ No
- ☐ N/A

Antifreeze Container Level (inches)

Enter a number...

Chemicals Present (Check all that apply)

- ☐ Brake Cleaner
- ☐ Engine Degreaser
- ☐ Coolant
- ☐ Brake Fluid
- ☐ Other (Specify in Long Text)

Specify 'Other' Chemicals (if applicable)

Write something...

Last Chemical Inventory Date

Enter date...

Secondary Containment in Place?

- ☐ Yes
- ☐ No
- ☐ N/A

MSDS Documentation (upload)

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Lifting Equipment

Checks for hoists, jacks, and lifts – inspection of safety devices and certifications.

Hoist Capacity (lbs/kg)

Last Inspection Date

Lift Speed (ft/min)

Safety Brake Functioning?

☐ Pass☐ Fail☐ N/A

Limit Switch Functioning?

☐ Pass☐ Fail☐ N/A

Any Abnormal Noises During Operation?

Write something...

Upload Inspection Certificate (if applicable)

 Upload File

Compressed Air Systems

Inspection of hoses, connections, and pressure regulators.

Air Pressure (PSI)

Enter a number...

Hose Condition

- ☐ Good
- ☐ Fair
- ☐ Poor - Replace

Quick Connect Condition

- ☐ Good
- ☐ Fair
- ☐ Poor - Replace

Filter Condition (Scale 1-10, 10 = New)

Enter a number...

Notes/Observations (e.g., leaks, unusual noises)

Write something...

Last Filter Change Date

Enter date...

Electrical Systems

Check for frayed wires, proper grounding, and safe operation of equipment.

Voltage Level (V)

Enter a number...

Grounding Condition

- ☐ Adequate
- ☐ Needs Improvement
- ☐ Insufficient

Amperage of Main Breaker (A)

Enter a number...

Cord & Plug Condition

- ☐ Good
- ☐ Frayed/Damaged
- ☐ Needs Repair

Last Electrical System Inspection Date

Enter date...

Personal Protective Equipment (PPE)

Availability and use of safety glasses, gloves, respirators, and other PPE.

Safety Glasses Available?

- ☐ Yes
- ☐ No
- ☐ N/A

Gloves Available?

- ☐ Yes
- ☐ No
- ☐ N/A

Number of Respirators Available

Enter a number...

Type of Respirators Available (if any)

- ☐ Dust Masks
- ☐ Half-Face Respirators
- ☐ Full-Face Respirators
- ☐ None

PPE Condition - Any damaged or worn items?

- ☐ Safety Glasses
- ☐ Gloves
- ☐ Respirators
- ☐ Hearing Protection
- ☐ Other
- ☐ None

Notes on PPE condition or replacement needs

Write something...

Ventilation

Adequate ventilation for fumes and exhaust.

Exhaust Fan CFM (Cubic Feet per Minute)

Enter a number...

Local Exhaust Ventilation Airflow (Velocity)

Enter a number...

Ventilation System Type

- ☐ General Shop Exhaust
- ☐ Local Exhaust (Welding, Spray Booth)
- ☐ Other

Description of Ventilation System (if 'Other' selected)

Write something...

Filters Condition

- ☐ Clean
- ☐ Slightly Dirty
- ☐ Dirty - Needs Replacement

Last Filter Replacement Date

Enter date...

Floor Conditions

Check for slips, trips, and falls hazards – oil spills, debris, and uneven surfaces.

Oil Spot Count

Surface Condition

- ☐ Dry & Clean
- ☐ Slightly Oily
- ☐ Oily
- ☐ Wet
- ☐ Debris Present

Description of Any Hazards

Trip Hazard Count

Floor Marking Condition

- ☐ Clear & Visible
- ☐ Faded
- ☐ Missing
- ☐ Damaged

Waste Disposal

Proper disposal of used oil, antifreeze, and other hazardous waste.

Last Waste Disposal Date

Used Oil Volume (Gallons)

Antifreeze Volume (Gallons)

Waste Oil Container Condition

- ☐ Good
- ☐ Damaged
- ☐ Leaking

Waste Manifest Details/Notes

Waste Manifest Upload

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