



Electrical Safety Inspection Checklist

General Information

Basic details about the inspection, location, and personnel involved.

Inspection Date

Enter date...

Inspection Time

Area/Department Inspected

 [Set My Current Location](#)



Inspector's Name

Write something...

Inspector's Title/Role

Write something...

Supervising Personnel (if applicable)

Write something...

Equipment/Area ID (if applicable)

Enter a number...

Weather Conditions (Optional)

- ☐ Clear
- ☐ Rain
- ☐ Snow
- ☐ Fog
- ☐ Other

Visual Inspection of Equipment & Wiring

Observing for obvious signs of damage, wear, or improper installation.

Inspect for damaged or frayed insulation on cables and wires.

☐ Yes

☐ No

☐ N/A

Check for cracked or broken equipment housings and enclosures.

☐ Yes

☐ No

☐ N/A

Are there signs of overheating (discoloration, melting)?

☐ Yes

☐ No

☐ N/A

Note any cracks, or breaks (count):

Enter a number...

Describe any observed defects or damage:

Write something...

Attach photos of any observed damage:

 Upload File

Condition of wiring supports and conduits:

- ☐ Good
- ☐ Fair
- ☐ Poor

Grounding and Bonding

Verification of proper grounding and bonding of equipment and systems.

Is the grounding conductor properly sized according to code?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Are all metal enclosures and equipment properly bonded?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Measured grounding resistance (ohms):

Enter a number...

Is the grounding electrode system adequate?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Notes/Observations regarding grounding and bonding:

Write something...

Attach photos of grounding connections (if applicable):

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Overcurrent Protection (Circuit Breakers & Fuses)

Checking the adequacy and functionality of circuit breakers and fuses.

Circuit Breaker Ampacity (Rated Value)

Enter a number...

Fuse Rating (Amps)

Enter a number...

Circuit Breaker Condition

- ☐ Good
- ☐ Damaged
- ☐ Corroded
- ☐ Loose
- ☐ Missing
- ☐ Other (Specify)

Fuse Condition

- ☐ Good
- ☐ Open
- ☐ Damaged
- ☐ Corroded
- ☐ Missing
- ☐ Other (Specify)

Breaker Trip Curve Conformance (Optional – if tested)

Enter a number...

Comments/Observations regarding Overcurrent Protection

Write something...

Breaker Labeling Clear and Accurate?

- ☐ Yes
- ☐ No
- ☐ N/A

Fuse Marking Present and Legible?

- ☐ Yes
- ☐ No
- ☐ N/A

Lockout/Tagout (LOTO) Procedures

Assessment of LOTO program implementation and effectiveness.

Is a written LOTO program available and current?

- ☐ Yes
- ☐ No
- ☐ N/A

Are employees trained on the LOTO procedures?

- ☐ Yes
- ☐ No
- ☐ N/A

Date of last LOTO training for employees.

Enter date...

Describe any observed deficiencies in LOTO implementation.

Write something...

Which of the following LOTO elements are present and functional?

- ☐ Lockout Devices
- ☐ Tagout Devices
- ☐ Procedures for Group Lockout
- ☐ Energy Isolation Checks
- ☐ Stored Energy Documentation

Number of documented LOTO incidents in the last year.

Enter a number...

Are energy isolation steps verified before starting work?

- ☐ Yes
- ☐ No
- ☐ N/A

Upload a copy of the current LOTO procedure document (if applicable).

 Upload File

Electrical Safety Devices

Verification of the presence, condition, and functionality of safety devices like GFCI and AFCI.

Number of GFCI outlets inspected

Enter a number...

GFCI outlet status (per inspection)

- ☐ Pass
- ☐ Fail - Needs Repair
- ☐ Not Present
- ☐ Not Applicable

Number of AFCI breakers inspected (if applicable)

Enter a number...

AFCI breaker status (per inspection - if applicable)

- ☐ Pass
- ☐ Fail - Needs Repair
- ☐ Not Present
- ☐ Not Applicable

Arc Flash Labeling Present on Equipment?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Comments on Arc Flash Labeling or other safety devices

Write something...

Emergency Disconnect Switches - Condition

- ☐ Good
- ☐ Fair
- ☐ Poor - Requires Attention

Work Area Safety

Checking for hazards related to electrical equipment in work areas.

Are walkways and aisles clear of obstructions?

- ☐ Yes
- ☐ No
- ☐ N/A

Is adequate lighting provided in work areas?

- ☐ Yes
- ☐ No
- ☐ N/A

Distance from electrical equipment to nearest combustible material (inches)

Enter a number...

Check all that apply: What hazards are present in the work area?

- ☐ Exposed wiring
- ☐ Damaged equipment
- ☐ Wet conditions
- ☐ Overcrowding
- ☐ None Observed

Describe any observed electrical hazards in the work area.

Write something...

Are electrical panels accessible and properly labeled?

- ☐ Yes
- ☐ No
- ☐ N/A

Emergency Procedures & Signage

Ensuring proper emergency procedures are in place and clearly posted.

Are Emergency Contact Numbers Posted?

- ☐ Yes
- ☐ No
- ☐ N/A

Are Evacuation Routes Clearly Marked?

- ☐ Yes
- ☐ No
- ☐ N/A

Are Emergency Shutdown Procedures Documented?

- ☐ Yes
- ☐ No
- ☐ N/A

Describe any issues or observations related to emergency signage.

Write something...

Are emergency lighting fixtures functional?

- ☐ Yes
- ☐ No
- ☐ N/A

Date of last Emergency Drill

Enter date...

Name of person responsible for Emergency Procedures

Write something...

Employee Training & Competency

Reviewing documentation and observing practices related to employee electrical safety training.

Last Electrical Safety Training Date

Enter date...

Number of Employees Trained on Electrical Safety

Enter a number...

Training Program Type

- ☐ Classroom
- ☐ Online
- ☐ Hands-on
- ☐ Combination


Topics Covered in Training (Select all that apply)

- ☐ Lockout/Tagout Procedures
- ☐ Hazard Identification
- ☐ Safe Work Practices
- ☐ Personal Protective Equipment (PPE)
- ☐ Emergency Procedures
- ☐ NFPA 70E Compliance

Brief Summary of Training Content

Write something...

Training Records/Certificates (Optional)

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Competency Assessment Method

- ☐ Written Exam
- ☐ Practical Assessment
- ☐ Observation
- ☐ Combination

Record Keeping

Verification of records pertaining to inspections, maintenance, and repairs.

Last Electrical Safety Inspection Date

Enter date...

Inspection Frequency (e.g., months between inspections)

Enter a number...

Upload Previous Inspection Report

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Summary of Corrective Actions Required (from previous inspection)

Write something...

Status of Corrective Actions from Previous Inspection (e.g., Completed, In Progress, Pending)

Write something...

Maintenance Records Available (e.g., Yes, No, Partial)

- ☐ Yes
- ☐ No
- ☐ Partial

Date of Last Equipment Maintenance Record Reviewed

Enter date...