



Farm Safety Inspection Report Checklist

General Farm Environment

Overall assessment of the farm's physical layout, housekeeping, and accessibility. Covers things like walkways, fencing, and general order.

Farm Entrance Condition

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Walkway Condition (Select all that apply)

- ☐ Clear of Obstacles
- ☐ Well-Lit
- ☐ Even Surface
- ☐ Adequate Drainage
- ☐ Needs Improvement

Number of Trip Hazards Observed

Enter a number...

Describe any observed security concerns (e.g., fencing, gate access)

Write something...

General Cleanliness (Select all that apply)

- ☐ Work Areas Clean
- ☐ Waste Disposal Adequate
- ☐ Storage Areas Organized
- ☐ Needs Improvement

Date of Last Groundskeeping/Clean-up

Enter date...

Machinery and Equipment

Inspection of tractors, combines, planters, sprayers, and other farm machinery, including safety devices and maintenance.

Tractor Hours

Enter a number...

PTO Shield Condition (Tractors)

- ☐ Intact and Secure
- ☐ Damaged or Missing
- ☐ Needs Repair

Safety Devices Present on Combine (Select all that apply)

- ☐ ROPS (Roll-Over Protective Structure)
- ☐ Seatbelt
- ☐ Backup Alarm
- ☐ Lights (working)
- ☐ None Present

Comments on Machinery Condition

Write something...

Last Maintenance Date (Major Equipment)

Enter date...

Condition of Hydraulic Hoses

- ☐ Good
- ☐ Cracked
- ☐ Leaking
- ☐ Needs Inspection

Upload Photo of ROPS (if applicable)

 Upload File

Electrical Safety

Evaluation of electrical systems, wiring, grounding, and equipment to prevent shock hazards and fires.

Voltage of Main Electrical Service (V)

Enter a number...

Condition of Wiring (Visible Areas)

- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ Not Visible

Potential Electrical Hazards Observed

- ☐ Exposed Wiring
- ☐ Damaged Outlets
- ☐ Overloaded Circuits
- ☐ Missing Grounding
- ☐ Water Proximity
- ☐ None Observed

Condition of Grounding System

- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ Not Applicable

Date of Last Electrical Inspection

Enter date...

Details of Any Electrical Issues Found and Recommended Actions

Write something...

Upload Photos of Electrical Equipment (if applicable)

 Upload File

Confined Spaces

Assessment of areas with limited entry and exit, potential for hazardous atmospheres, and lack of ventilation (e.g., grain bins, silos).

Description of Confined Spaces Present

Write something...

Potential Hazards Identified (Select all that apply)

- ☐ Oxygen Deficiency
- ☐ Toxic Gases
- ☐ Flammable Atmospheres
- ☐ Engulfment Hazard
- ☐ Dust Explosion Hazard
- ☐ Other (Specify in LONG_TEXT)

Oxygen Level (%)

Enter a number...

Hydrogen Sulfide (H₂S) Level (ppm)

Enter a number...

Atmospheric Testing Performed?

- ☐ Yes
- ☐ No

Date of Last Confined Space Entry Permit Review

Enter date...

Employee Training on Confined Space Entry Procedures?

- ☐ Yes
- ☐ No

Description of Ventilation/Control Measures in Place

Write something...

Hazardous Materials

Evaluation of storage, handling, and disposal of chemicals (pesticides, herbicides, fertilizers), fuels, and other hazardous substances.

Quantity of Pesticides Stored (lbs/gallons)

Enter a number...

Quantity of Fertilizer Stored (tons/lbs)

Enter a number...

Types of Hazardous Materials Present (Check all that apply)

- ☐ Pesticides
- ☐ Herbicides
- ☐ Fertilizers
- ☐ Fuels (Gasoline, Diesel)
- ☐ Propane
- ☐ Other (Specify)

Description of Secondary Containment Measures (e.g., berms, liners)

Write something...


Condition of Chemical Storage Containers

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Date of Last Chemical Inventory

Enter date...

SDS for Key Chemicals (Upload)

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Is there a designated chemical handling area?

- ☐ Yes
- ☐ No

Notes on spills or leaks observed.

Write something...

Personal Protective Equipment (PPE)

Assessment of availability, condition, and usage of appropriate PPE for various tasks (e.g., gloves, eye protection, respirators, hearing protection).

Are appropriate gloves available for handling pesticides?

- ☐ Yes
- ☐ No
- ☐ N/A

Are employees trained on proper glove selection and usage?

- ☐ Yes
- ☐ No
- ☐ N/A

Number of approved respirators available for pesticide application?

Enter a number...

Describe the PPE training provided to employees (frequency, topics covered).

Write something...

Upload a copy of the PPE training documentation.

 Upload File

What type of eye protection is commonly used?

- ☐ Safety Glasses
- ☐ Goggles
- ☐ Face Shield
- ☐ Other

Is hearing protection available and used when operating loud machinery?

☐ Yes

☐ No

☐ N/A

Working at Heights

Inspection of ladders, scaffolds, and other elevated work areas, ensuring proper safety measures are in place.

Are guardrails present on elevated platforms/structures?

☐ Yes

☐ No

☐ Not Applicable

Maximum allowable height for ladders without fall protection?

Enter a number...

Are ladders inspected regularly?

☐ Yes

☐ No

☐ Unsure

What types of fall protection are used?

☐ Harness and Lanyard

☐ Safety Net

☐ Guardrail System

☐ None

Date of last ladder inspection

Enter date...

Describe any observed deficiencies related to working at heights.

Write something...

Animal Handling

Review of procedures and equipment related to livestock handling, including facilities, restraint methods, and potential hazards.

Livestock Handling Facility Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Potential Hazards Observed During Handling (Check all that apply)

- ☐ Sharp edges on pens/gates
- ☐ Inadequate lighting
- ☐ Slippery surfaces
- ☐ Insufficient ventilation
- ☐ Damaged or missing gates
- ☐ Lack of crowd control equipment

Number of Employees Trained in Livestock Handling

Enter a number...

Date of Last Livestock Handling Training

Enter date...


Description of Crowd Control Equipment Available

Write something...

Type of Restraint Methods Used

- ☐ Manual
- ☐ Mechanical
- ☐ Combination

Photos of Handling Facilities

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Description of any Recent Animal Handling Incidents

Write something...

Noise Exposure

Assessment of noise levels and implementation of noise reduction measures where necessary.

Measured Noise Level (dBA)

Enter a number...

Are employees trained on noise hazard recognition?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Is Hearing Protection Required for Certain Tasks?

- ☐ Yes
- ☐ No
- ☐ Not Applicable

Which areas or tasks exhibit high noise levels?

- ☐ Tractor Operation
- ☐ Combine Operation
- ☐ Grain Handling
- ☐ Equipment Maintenance
- ☐ Other: (Please Specify)

Comments/Observations regarding Noise Exposure

Write something...

Emergency Preparedness

Evaluation of emergency plans, communication systems, first aid supplies, and fire extinguishers.

Number of Trained First Responders

Enter a number...

Emergency Contact List Available?

- ☐ Yes
- ☐ No
- ☐ Unsure

Brief description of the farm's Emergency Action Plan (EAP)

Write something...

Last EAP Review/Update Date

Enter date...

Types of Emergency Drills Conducted (Check all that apply)

- ☐ Fire Drill
- ☐ Medical Emergency Drill
- ☐ Chemical Spill Drill
- ☐ Severe Weather Drill
- ☐ Other (Specify in LONG_TEXT)

Number of Functional Fire Extinguishers

Enter a number...

First Aid Kit Availability?

- ☐ Yes
- ☐ No
- ☐ Unsure

Location of Primary Fire Extinguisher

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