

# Lockout/Tagout (LOTO) Checklist

This Template was installed **0** times.

## **Pre-Shift Planning & Hazard Assessment**

Initial steps to identify hazards and plan the LOTO procedure.

Date of Assessment	
Enter date	
Time of Assessment Start	
Brief Description of Task/Job to be Performed	
Write something	
Potential Hazards Identified (Initial Assessment)	
Write something	







Hazards Related to Previous Incidents/Near Misses?  Yes No Unknown
Previous Control Measures (if any) & Their Effectiveness  Write something
Risk Level (Based on Initial Assessment)  Low  Medium  High
Name of Person Performing Hazard Assessment
Write something
Signature of Person Performing Hazard Assessment
Medium High  Name of Person Performing Hazard Assessment  Write something

## **Identify Energy Sources**

What types of energy are present?	
☐ Electrical	
Pneumatic	
Hydraulic	
Mechanical (e.g., rotating shafts)	
Thermal (e.g., steam, hot oil)	
Chemical (e.g., pressurized vessels)	
Gravitational (e.g., elevated loads)	
None	
Describe any unusual or non-standard energy sources.	
Write something	)
	/
Voltage of electrical supply (if applicable)	
Voltage of electrical supply (if applicable)  Enter a number	)
	)
	)
Enter a number	)
Enter a number  Pressure of pneumatic/hydraulic systems (if applicable)	
Enter a number  Pressure of pneumatic/hydraulic systems (if applicable)	
Enter a number  Pressure of pneumatic/hydraulic systems (if applicable)	
Pressure of pneumatic/hydraulic systems (if applicable)  Enter a number	)
Pressure of pneumatic/hydraulic systems (if applicable)  Enter a number  Identify the primary energy source requiring isolation.	
Enter a number  Pressure of pneumatic/hydraulic systems (if applicable)  Enter a number  Identify the primary energy source requiring isolation.  Electrical	
Pressure of pneumatic/hydraulic systems (if applicable)  Enter a number  Identify the primary energy source requiring isolation.  Electrical Pneumatic	

Write something	
solation & Shutdown Procedures	
eps for isolating and shutting down equipment.	
Detailed Step-by-Step Shutdown Procedure	
Write something	
Equipment ID Number	
Enter a number	
Shutdown Sequence (e.g., Normal Stop, Emergency S	top)
☐ Normal Stop	
Emergency Stop	
Controlled Shutdown	

<b>/</b>	Set My Current Location	
2		
Date of Proce	edure Review/Update (Last Reviewed)	
Pate of Proce	edure Review/Update (Last Reviewed)	
	edure Review/Update (Last Reviewed)	
	edure Review/Update (Last Reviewed)	
Enter date	edure Review/Update (Last Reviewed)	
Enter date		
Enter date	down Initiation	
Enter date		
Enter date	down Initiation  Considerations for Shutdown?	
Enter date Time of Shute	down Initiation  Considerations for Shutdown?	

# **Lockout/Tagout Application**

Applying locks and tags to energy isolation points.

Lock Type Used (e.g., Keyed, Combination)  Keyed Lock Combination Lock Other (Specify in LONG_TEXT)	
Lock ID Number  Enter a number	
Tag Type Used  Standard Tag  Custom Tag  Blank Tag (To be filled)	
Tag ID Number  Enter a number	
Tag Information  Write something	

	Set My Current Location	
2		
North autoral Day		
_	sonnel Applying LOTO	
Single Authoriz		
Multiple Author		
Group Lockout	Procedure	
Nuthorized Der	sonnel Signature (Lock Application)	
Authorized Per	——————————————————————————————————————	
erification	n of Isolation	

Enter a number...

Voltage Reading (Phase-to-Neutral)	
Enter a number	
Current Reading (Amps)	
Enter a number	
Confirm Zero Energy State?	
☐ Yes ☐ No	
Describe Verification Steps Taken	
Write something	
Sound Check (Confirm no equipment noise)	
Yes	
□ No	
Movement Check (Confirm no unintended movement)    Yes	
□ No	
Verification Date	

Verification Time	
Work Performance & Observation	

Ensuring work is performed safely and observing for any potential issues.

Describe the work being performed on the equipment.
Write something
Number of personnel working on the equipment.
Enter a number
Are there any unusual noises or movements observed?
Yes
□ No
If yes, describe the unusual noises or movements.
Write something
Were any tools or equipment accidentally moved or dropped during the work?
☐ Yes ☐ No

Write something		
vviito oomotimig		
		in a O
_	g discomfort or noticing anything concerr	iing ?
Yes		
No		
f yes, describe the di	scomfort or concern.	
Write something		
emoval of LC	TO & Equipment Restart	
	TO & Equipment Restart s and tags and safely restarting equipment.	
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Date of LOTO Remova	s and tags and safely restarting equipment.	
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Date of LOTO Remova	s and tags and safely restarting equipment.	
Date of LOTO Remova  Enter date  Time of LOTO Remova	al	
Date of LOTO Remova  Enter date  Time of LOTO Remova	al	
Date of LOTO Remove Enter date  Time of LOTO Remove	al	

accordance with our Privacy Policy

If 'Other' selected, please explain reason for removal  Write something	
Was a visual inspection performed?  Yes No	
Equipment Voltage/Pressure after Verification  Enter a number	
Confirmation of Clear Communication with Affected Personnel  Yes No	
Authorized Personnel Signature (Removal)	
Name (Printed) of Authorized Personnel  Write something	

## **Documentation & Sign-off**

Decording the LOTO procedure and confirming completion

Date of LOTO Procedure
Enter date
Time of LOTO Implementation
Equipment/Machine ID
Enter a number
Brief Description of Work Performed
Write something
LOTO Broadure Followed (Beforence)
LOTO Procedure Followed (Reference)  Standard Procedure A
Standard Procedure B
Custom Procedure - Specify in Notes
Additional Notes/Observations
Write something
Authorized Lockout Person Signature

## **Related Checklist Templates**

Good
Laboratory
Practice
(GLP)
Checklist

Confined
Space
Entry
Checklist

Management
Of Change
(MOC)
Checklist

Personal
Protective
Equipment
(PPE)
Compliance
Checklist

A3
Problem
Solving
Report
Checklist

Ergonomic
Assessment
Checklist

First
Article
Inspection
(FAI)
Checklist

Maintenance
Pre-Startup
Safety
Review
(PSSR)

FMEA (Failure Mode And Effects Analysis) Checklist

Calibration Checklist

#### WE CAN DO IT TOGETHER

#### **NEED HELP WITH CHECKLISTS?**

Have a question? We're here to help. Please submit your inquiry, and we'll respond promptly.

Email Address		
Phone Number		
How can we help?		
	SEND YOUR REQUEST	