

INSPECTION FORM

Harnesses

Harness with Waist Pad

*Not all features may be present



Manufacturer: _____

Model #: _____

Description: _____

Serial #: _____

Lot #: _____

Date of Manufacture: _____

Labels & Markings

PASS FAIL

Label (Intact & Legible)

Appropriate ANSI/OSHA/CSA Markings

Inspections are Current / Up-to-Date

Date of First Use

Impact Indicator (Signs of Deployment)

Hardware & Components

(Buckles, D-Rings, Lanyard Keepers)

PASS FAIL

Adjuster Buckles

Chest, Leg & Waist

D-Rings (Dorsal, Hip, Shoulder, or Sternal)

Lanyard Keepers

Corrosion / Pitting / Nicks / Rust / Bends

Webbing

PASS FAIL

Shoulder / Chest / Leg / Waist

Cuts / Burns / Holes

Paint Contamination

Excessive Wear

Heat / UV Damage

Stitching

PASS FAIL

Shoulder, Chest, Torso, Back, Legs

Owner / Company: _____

Name of Inspector: _____

Signature: _____

Date of Inspection: _____

In-Service Date: _____

Clear Form

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607 East Sam Houston Parkway South, Suite 800
Pasadena, TX 77503 USA