

| SNAP HOOKS | YES | NO | N/A | LOSS of FAITH | PASS | FAIL | INITIAL | DETAILS / COMMENTS |
|---------------------|------------|-----------|------------|----------------------|-------------|-------------|----------------|---------------------------|
| Excessive wear | | | | | | | | |
| Excessive dirt | | | | | | | | |
| Sharp edges, cracks | | | | | | | | |
| 2 Action open | | | | | | | | |
| Locking action | | | | | | | | |
| Corrosion | | | | | | | | |

| STITCHING | YES | NO | N/A | LOSS of FAITH | PASS | FAIL | INITIAL | DETAILS / COMMENTS |
|------------------------|------------|-----------|------------|----------------------|-------------|-------------|----------------|---------------------------|
| Fully stitched | | | | | | | | |
| Backstitch present | | | | | | | | |
| Pulled or cut stitches | | | | | | | | |

| LANYARDS & LIFELINES | YES | NO | N/A | LOSS of FAITH | PASS | FAIL | INITIAL | DETAILS / COMMENTS |
|--|------------|-----------|------------|----------------------|-------------|-------------|----------------|---------------------------|
| Appropriate OHSA / CSA markings or labels | | | | | | | | |
| Cuts, burns, tears or frays | | | | | | | | |
| Abrasion | | | | | | | | |
| Knots | | | | | | | | |
| Excessive soiling | | | | | | | | |
| Contact with chemicals / solvents | | | | | | | | |
| Contact with grease / oil / paint/ marker | | | | | | | | |
| UV damage (discoloration), mildew, rotting | | | | | | | | |
| Evidence of heat damage (friction, welding splatter, sparks, burn holes) | | | | | | | | |
| Distortion of housing | | | | | | | | |
| Spring tension allows for retraction and for retention | | | | | | | | |
| Indicator for activation / deployed | | | | | | | | |
| Broken wires | | | | | | | | |

| LABELS & MARKINGS | YES | NO | N/A | LOSS of FAITH | PASS | FAIL | INITIAL | DETAILS / COMMENTS |
|---|------------|-----------|------------|----------------------|-------------|-------------|----------------|---------------------------|
| Appropriate OHSA / CSA markings or labels | | | | | | | | |
| Legible | | | | | | | | |
| Securely held in place | | | | | | | | |
| Manufacturer's in-service date | | | | | | | | |

| | | | |
|----------------------------|--------------------------|-----------------|------------------------------|
| Overall Disposition | <input type="checkbox"/> | Accepted | Inspected By: _____ |
| | <input type="checkbox"/> | Rejected | Date Inspected: _____ |