

Office Safety Review Checklist

Office Location

Reviewer Name

Date

General Safety

Item	Yes	No	N/A	Comments
Exits are clearly marked and unobstructed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
Floors are free from trip hazards	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
First aid kits are accessible and stocked	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>

Fire Safety

Item	Yes	No	N/A	Comments
Fire extinguishers are visible and accessible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
Smoke detectors are functional	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
Evacuation routes are posted	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>

Electrical Safety

Item	Yes	No	N/A	Comments
Cords and plugs are in good condition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
No overloaded power strips or outlets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>
Electrical panels are accessible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<div></div>

Ergonomics

Item	Yes	No	N/A	Comments
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Chairs and desks are adjustable for comfort	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Monitors are positioned at eye level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Workstations are free from clutter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Additional Notes

Enter additional notes, observations, or follow-up actions here.