

# Blank Laboratory Audit Checklist

Laboratory Name

Audit Date

Auditor

## General Laboratory Conditions

Item	Yes	No	N/A	Comments
Lab cleanliness maintained				
Proper signage in place				
Clear access to exits and aisles				

## Quality Assurance Practices

Item	Yes	No	N/A	Comments
Documented procedures available				
Calibration records maintained				
Training records up to date				

## Safety and Compliance

Item	Yes	No	N/A	Comments
PPE available and worn				
Chemical storage compliant				
Fire safety equipment accessible				

## Additional Observations or Notes

Auditor's Signature

Date

