



Manufacturer: _____

Company: _____

Model Number: _____

Name of Inspector: _____

Description: _____

Signature: _____

Serial Number: _____

Date of Inspection: _____

Lot Number: _____

In-Service Date: _____

Date of Manufacture: _____

Lifeline Material: Galvanized Steel Stainless Steel Web

LABELS & MARKINGS

PASS FAIL NOTE

	PASS	FAIL	NOTE
Label (Intact and Legible)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate ANSI / OSHA / CSA Markings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspections are Current / Up-to-Date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of First Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SHOCK PACK (IF PRESENT)

PASS FAIL NOTE

	PASS	FAIL	NOTE
Cover / Shrink Tube (Don't Cut or Remove)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Damage / Fraying / Broken Stitching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact Indicator (Signs of Deployment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HOUSING

PASS FAIL NOTE

	PASS	FAIL	NOTE
Attachment Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts / Bolts / Rivets / Screws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evidence of Damage (Dents / Cracks / Rust)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LIFELINE (WEB OR CABLE)

PASS FAIL NOTE

	PASS	FAIL	NOTE
Termination (Stitch, Splice, or Swage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cuts / Fraying / Broken Stitching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excessive Wear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cable Separating / Bird-Caging	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entire Length Retracts Smoothly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Test Braking / Locking Function	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CONNECTORS

PASS FAIL NOTE

	PASS	FAIL	NOTE
Connector (Self-Closing & Locking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact Indicator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hook Body / Rivets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrosion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pitting / Nicks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SELF-RETRACTING DEVICES



NOTES

