

HOUSEKEEPING CHECKLIST

Name of Church

Person Inspecting	Date of Inspec	Date of Inspection (dd/mm/yyyy)			
	/		/		

No.	Checklist Items	Yes	No	N/A		
Floors,	Aisles, Stairs & Landings					
1	All aisles are clear					
2	Aisles are free of slip, trip and fall hazards					
3	Stairs free of worn or broken treads					
4	Handrails are in good repair					
5	Non-skid strips on chairs are in good condition					
Storage						
6	No storage in traffic areas					
7	Stacks stable with good bases					
8	No rubbish or unwanted material					
9	Flammable items correctly stored					
Electric	Electrical Power					
10	Plugs, sockets and switches in good order					
11	Free of frayed or defective leads					
12	Free of double adaptors or piggy-back plugs					
13	All lights adequate or operational					
14	Residual Current Devices installed and maintained					
First Ai	id					
15	First Aid kits identified and appropriately stocked					
16	Names of qualified first aiders displayed					
Emerge	ency Response/Fire Protection					
17	Evacuation Procedures clearly displayed					
18	Fire extinguishers appropriate to material					
19	Extinguishers readily available and properly mounted					
20	Exits and exit signs adequately illuminated					
21	Exits and fire doors in good repair and unobstructed, internally and externally					
Car Park/Outdoor Areas						
22	Clean and free from rubbish					
23	Even surfaces – no holes					
24	Free of grease and oil					
25	Vehicle traffic ways clearly marked and lit					
26	Free of dense shrubbery obstructing vision					



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No.	Checklist Items	Yes	No	N/A		
Equipm	Equipment					
27	Office chairs suitable and in good condition					
28	Ladders serviceable, no broken rungs/defects					
29	Metal ladders not used for electrical work					
30	WHS policies and procedures appropriately displayed					
31	Safety signs clearly displayed where necessary	_				
32	Kitchen appliances properly maintained	_				

Any items identified as needing attention should be listed on the Action Plan below.

Action Required	By Whom	By When (Date)	Completed (Date)