

INSPECTION FORM

SELF-RETRACTING LIFELINE

Serial # _____

Owner/Company: _____

Date of First Use: _____

Inspector: _____

Date of Manufacture: _____

Date of Inspection: _____

LABELS & MARKINGS

Pass Fail

Are labels intact & legible? ☐ ☐

Are appropriate ANSI/OSHA/CSA markings visible? ☐ ☐

Are inspections are current/up-to-date? ☐ ☐

Is date of first use documented? ☐ ☐

HARDWARE (BUCKLES & D-RINGS)

Pass Fail

Is fall indicator tripper? ☐ ☐

Is connector free corrosion/cracks/pitting/deformation? ☐ ☐

Does connector latch seat into nose properly? ☐ ☐

Does connector spring firmly close latch? ☐ ☐

Does connector keeper lock gate properly? ☐ ☐

HOUSING

Pass Fail

Is housing free of cracks/defects/blemishes? ☐ ☐

Are all fasteners present/tight? ☐ ☐

Does anchor point rotate and undamaged? ☐ ☐

LIFELINE

Pass Fail

Is termination tight/undamaged? ☐ ☐

Is cable free of cuts or fraying (100%)? ☐ ☐

Does braking mechanism function per design? ☐ ☐

Does lifeline retract properly? ☐ ☐

Are cable strands all intact? ☐ ☐

Is buffer spring undamaged? ☐ ☐

Does cable show excessive wear? ☐ ☐



NOTES