

# Annual Inspection Certification Form

## Lockout/Tagout

MACHINE: \_\_\_\_\_  
(type, manufacturer, model and serial number)

INSPECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

**EMPLOYEES CONSULTED:**

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

RESULTS OF INSPECTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF INSPECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF SAFETY DIRECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_