



ABRASIVE BLASTING ENCLOSURE QUARTERLY INSPECTION FORM Abrasive Blasting Program - Appendix B

| | | | |
|--------------------------------|---|--------------------------|--------------------------|
| Facility: _____ | | Equipment: _____ | |
| Date: _____ | | | |
| | | Checked | |
| | Inspection Criteria | OK | Not OK |
| 1.0 | Inspect the blast enclosure | | |
| | a. Internal and external condition and signs of leakage | <input type="checkbox"/> | <input type="checkbox"/> |
| | b. Observation windows in good condition and protected by screening | <input type="checkbox"/> | <input type="checkbox"/> |
| | c. Door flanges and seals signs for leakage | <input type="checkbox"/> | <input type="checkbox"/> |
| | d. Gloves for leakage condition and signs of leakage | <input type="checkbox"/> | <input type="checkbox"/> |
| | e. General housekeeping | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.0 | Inspect blasting hose, nozzle and machinery | | |
| | a. Inspect hose, couplings and nozzle for wear and damage | <input type="checkbox"/> | <input type="checkbox"/> |
| | b. Check automatic cutoff (pneumatic or electric dead man switch) for operation | <input type="checkbox"/> | <input type="checkbox"/> |
| | c. Support for nozzle provided | <input type="checkbox"/> | <input type="checkbox"/> |
| | d. Electrical connections in good condition | <input type="checkbox"/> | <input type="checkbox"/> |
| | e. Mechanical equipment in good condition | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.0 | Inspect ventilation and dust collector system | | |
| | a. Internal and external condition and signs of leakage | <input type="checkbox"/> | <input type="checkbox"/> |
| | b. Gage consciously located | <input type="checkbox"/> | <input type="checkbox"/> |
| | c. Gage marked with safe operating range | <input type="checkbox"/> | <input type="checkbox"/> |
| | d. Ventilation operating in safe range | <input type="checkbox"/> | <input type="checkbox"/> |
| | e. Gage reading | <input type="checkbox"/> | <input type="checkbox"/> |
| Comments and required repairs: | | | |
| Signature: _____ | | | |