

TIE-OFF ADAPTORS

Inspection Checklist / Log

Tie-Off Adaptor Model: _____ Manufacture Date: _____

Serial Number: _____ Lot Number: _____ Purchase Date: _____

Comments: _____

GENERAL FACTORS	ACCEPTED / REJECTED	SUPPORTIVE DETAILS OR COMMENTS
1.) Hardware: (Includes D-rings) Inspect for damage, distortion, sharp edges, burrs, cracks and corrosion.	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
2.) Webbing: Inspect for cuts, burns, tears, abrasion, frays, excessive soiling and discoloration.	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
3.) Stitching: Inspect for pulled or cut stitches.	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
4.) Labels: Inspect, make certain all labels are securely held in place and legible.	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____
	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	_____ _____ _____

OVERALL DISPOSITION	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED	INSPECTED BY: _____ DATE INSPECTED: _____
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