

INSPECTION FORM

ANCHORAGE CONNECTORS

Inspection Date: _____

Owner/Company: _____

Manufacturer: _____

Inspector Name: _____

Date of Manufacture: _____

Signature: _____

Model #: _____

Date Issued: _____

Serial #: _____

Community Product: YES NO

LABELS & MARKINGS	PASS	FAIL	NOTE
Label Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Label Legible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appropriate ANSI/OSHA Markings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HARDWARE	PASS	FAIL	NOTE
Corrosion or Rust Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Deformation (Pitting or Nicks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Connection Points	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hardware Functions In Proper Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ANCHORAGE CONNECTOR	PASS	FAIL	NOTE
Cuts, Burns, or Abrasions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stitching/Wire Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Termination (Stitch, Splice, Swage)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat or UV Damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condition Welds & Rivets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



NOTES: _____

SUMMARY:

Acceptable

Unacceptable

Reason: _____

DISPOSITION: Returning to service
 Destroyed (Date) _____
 Other _____

Next Inspection Date: _____