
Safety and Environmental Health

Vessel Checklists

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Administration Checklist

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| ADM-01 | ** The unit commanding officer/officer-in-charge has appointed a Unit Safety Officer (The XO/XPO must be assigned as the Unit Safety Officer for afloat units). | COMDTINST M5100.47, Chapter 1-I-7(d) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-02 | The unit commanding officer/officer-in-charge has appointed a Unit Safety Coordinator. | COMDTINST M5100.47, Chapters 1-I-7(d) and 1-J-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-03 | The appointed Safety Supervisor has received training on their duties and responsibilities. | COMDTINST M5100.47, Chapters 1-I-7(d) and 1-J-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-04 | ** The District Commander has a regional safety manager. | COMDTINST M5100.47, Chapter 1-I-3(d) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-05 | The current Coast Guard "Occupational Safety and Health Rights and Responsibilities" poster is completed and displayed prominently in the workplace. | 29 CFR 1960.12(c) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-06 | ** A unit Safety and Health Committee is established, meets quarterly, and minutes are recorded and maintained (may be conducted as part of Group/MSO meetings for units subordinate to a Group or MSO). | COMDTINST M5100.47, Chapter 1-F-2.d. 29 CFR 1960.37 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ADM-07 | ** Periodic inspections are conducted of each workplace to identify and abate hazardous conditions. Copies of workplace inspections are maintained on file. | COMDTINST M5100.47, Chapter 1-F-3.a. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-08 | All mishaps that occur at the unit, or to unit personnel, are reviewed by the Safety and Health Committee. | COMDTINST M5100.47, Chapter 1-F-3.d.(8) 29 CFR 1960.29 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-09 | ** The Safety Officer ensures proper mishap analysis is conducted at the unit level (Unit Safety Board may function as permanent mishap board to investigate Class C and D mishaps). | COMDTINST M5100.47, Chapter 3-I-1 and 3-I-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-10 | A pre-mishap plan has been developed which defines required initial mishap response actions. | COMDTINST M5100.47, Chapter 3-E | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-11 | An immediate telephone report of all Class A and Class B mishaps is made to Coast Guard Headquarters via the chain-of-command within four hours. (Not required for off-duty Class A or B Mishaps.) | COMDTINST M5100.47, Chapter 3-J-1.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-12 | MISREPs are reported through the chain of command and MLC (K) office within a timely manner. | COMDTINST M5100.47, Chapter 3-M-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ADM-13 | ** Serious safety and environmental health hazards that cannot be corrected within 30 working days are documented in the Unit's Hazard Abatement Plan. | COMDTINST M5100.47, Enclosure (1) 3.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-14 | A Hazardous Condition Notification (HCN) form (available on MLC web sites) is used to document hazards discovered during workplace inspections. | COMDTINST M5100.47, Chapter 1-F-2.i. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-15 | ** All personnel receive Hepatitis A vaccine if: assigned to a WHEC, WMEC, WPB, PSU, or HDC, or are new accessions (active or reserve), or have high likelihood of exposure to unsafe food or water due to deployment to high risk areas. | COMDTINST 6230.8A, Paragraph 6.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-16 | ** A Food Service Officer (FSO) has been appointed by letter defining his/her responsibilities. | COMDTINST M6240.4, Chapter 1-C-1.b COMDTINST M4061.3, Chapter 2-B-4.(a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-17 | The Commanding Officer has designated a Pollution Prevention Coordinator. | COMDTINST M16455.10, Cover Letter, Paragraph 7-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ADM-18 | Managers and supervisors are thoroughly familiar with the procedures for reporting suspected safety and occupational health hazards. | COMDTINST M5100.47, Chapter 1-F-2.i. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-19 | ** Managers and supervisors are made aware of their responsibilities to ensure that employees are provided safe and healthful working conditions. | COMDTINST M5100.47, Chapter 1-A-1 and 1-A-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-20 | ** A Gas Free Engineer (GFE) / Gas Free Petty Officer (GFPO) has been designated and trained. (Vessel Only) | NSTM 074-18.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-21 | The unit has developed and implemented a Personnel Protective Equipment instruction. | 29 CFR 1910.132 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-22 | The unit has a confined space entry policy detailing authorized personnel, required training, limitations, etc. | NSTM 074, Volume 3-18.5 (Vessels) COMDTINST 5100.48A, Paragraph 7.h (Shore) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-23 | ** Personnel are provided documented trained in the selection and use of PPE prior to conducting tasks requiring their use. | 29 CFR 1910.132(f)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ADM-24 | Initial respiratory protection training is provided for all personnel who wear respirators. | COMDINST 6260.2C, Chapter 7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-25 | The unit has developed and implemented a Personnel Protective Equipment instruction. | MLCPACINST M6000.1D, Chap. 3-G-4.a.(1) 29 CFR 1910.132 COMDTINST M5100.47, Chapter 1-I-6.e.(3) and 1-I-7.e(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-26 | The unit has developed and implemented a traffic safety instruction. | COMDTINST M5100.47, Chapter 10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-27 | Appropriate personnel are aware of how to utilize a Hazardous Condition Notification (available on MLC web sites), and the command's responsibility to act on reported hazards. | COMDTINST M5100.47, Chapter 1-F-2.i. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-28 | Serious safety and occupational health hazards, beyond the unit's capability to correct within 30 days, are documented on a Hazardous Condition Notification report (available on MLC web sites) and included in a hazard abatement plan. | COMDTINST M5100.47, Chapter 1-F-2.i. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ADM-29 | ** The Commanding Officer has designated a Hazardous Materials Coordinator in writing. | COMDTINST 6260.21B, Paragraph 6-a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ADM-30 | The unit maintains a mishap file. | COMDTINST M5100.47 Chapter 1-F-3.d.(7) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Asbestos Checklist (vessel)

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| | ** Indicates a Significant Program Indicator | | |
| ASB-01 | ** If Asbestos Containing Material (ACM) is present, or suspected, an asbestos control program has been implemented. | COMDTINST M6260.16A, Chapter 2-B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-02 | ** The Cutter has an Asbestos Management Plan. | COMDTINST M6260.16A, Chapter 2-B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-03 | The unit conducts annual visual inspections of ACM. (Inspection may be conducted in conjunction with unit material inspections.) | COMDTINST M6260.16A, Chapter 2-G.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-04 | Personnel currently exposed, or with the potential of being exposed, to asbestos have had the proper training. | COMDTINST M6260.16A, Enclosure (6).I | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-05 | The Cutter has procedures for sampling and testing suspected asbestos containing material. | COMDTINST M6260.16A, Enclosure (1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-06 | ** The unit has on board, and properly utilizes, approved protective equipment (e.g., respiratory equipment, coveralls) when performing any emergency work associated with asbestos. | COMDTINST M6260.16A, Enclosure (6).E | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Asbestos Checklist (vessel)

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|-------------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| ASB-07 | ** A survey of the Cutter has been conducted by the MLC to specifically identify the location of any ACM. | COMDTINST M6260.16A, Chapter 2-B.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-08 | Asbestos removal / repair is limited to underway casualty repair work. | COMDTINST M6260.16A, Chapter 4-B.3. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-09 | Asbestos repair is directed by a person specifically trained in emergency asbestos repair procedures. | COMDTINST M6260.16A, Enclosure (6).A.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-10 | A CG-5197 has been completed for personnel who believe they have been exposed to asbestos in their Coast Guard career. CG-5197 and supporting data is reviewed by an industrial hygienist to determine if placement in OMSEP is warranted. | COMDTINST M6000.1, Chapter 12-D.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ASB-11 | ** There is a proper waste disposal method used for asbestos waste products and contaminated clothing. | COMDTINST M6260.16A, Enclosure (6).B.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Bloodborne Pathogen Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| BBP-01 | The unit has a written bloodborne pathogen plan to eliminate or minimize employee exposure. | 29 CFR 1910.1030 (c) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-02 | Employee exposure potential is determined by job and task classifications. | 29 CFR 1910.1030 (c)(2)(A-C) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-03 | Each individual determined to be at risk of exposure to bloodborne pathogens have access to a copy of the OSHA Bloodborne Pathogen standard (29 CFR 1910.1030). | COMDTINST M6220.8, Chapter 5-B-1.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-04 | ** Universal precautions or equivalent (e.g., standard precautions) are followed to prevent contact with blood or other potentially infectious material. | COMDTINST M6220.8, Chapter 2 / 29 CFR 1910.1030 (d)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-05 | ** Hepatitis B vaccinations are offered to employees exposed to blood or body fluids. | COMDTINST M6220.8, Chapter 2-B / 29 CFR 1910.1030 (c)(ii)(B)(f) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-06 | ** Procedures are established to ensure exposures to blood and body fluids are followed up appropriately. | COMDTINST M6220.8, Chapter 4-A & B / 29 CFR 1910.1030 (c)(ii)(B)(f) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Bloodborne Pathogen Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| BBP-07 | ** Engineering controls and safe work practices are established and practiced to control exposures to blood and body fluids. | COMDTINST M6220.8, Chapter 3-A & B / 29 CFR 1910.1030 (d)(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-08 | ** Appropriate personal protective equipment (e.g., gloves, masks, goggles) is available and utilized by personnel to control exposures to blood and body fluids. | COMDTINST M6220.8, Chapter 3-B.7.b / 29 CFR 1910.1030 (d)(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-09 | Bloodborne pathogen training (Level I for "increased risk" members and Level II for other "at risk" members) is provided upon initial assignment and at least annually to employees potentially exposed to blood and body fluids. | COMDTINST M6220.8, Chapter 5-A & B / 29 CFR 1910.1030 (g)(2)(A-C) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-10 | Food and drink are not placed in refrigerators, freezers, shelves, cabinets, or on counters where potentially infectious material are present. | COMDTINST M6220.8, Chapter 3-B.1.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-11 | ** Eating, drinking, applying cosmetics or lip balm, and handling contact lenses is prohibited when there is a possibility of occupational exposure to blood or body fluids. | COMDTINST M6220.8, Chapter 3-B.1.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| BBP-12 | Bloodborne pathogen training is interactive and follows lesson plan. | COMDTINST M6220.8, Chapter 5-A & B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Collection Holding and Transfer Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| CHT-01 | When leaks, spills, or other sources of contamination are observed in the CHT system, the Medical Department is immediately notified. | NAVMED P-5010, Chapter 7-18.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-02 | The Medical Department conducts visual inspections of the CHT system as part of the routine habitability and sanitation program or following routine maintenance, emergency repairs, or overhaul. | NAVMED P-5010, Chapter 7-21.2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-03 | Required warning placards and operating instructions are conspicuously posted on the CHT tank and in the equipment room. | NSTM 593-4.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-04 | The sump is equipped with an eductor or sump pump in working condition. | NSTM 593-4.2.14.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-05 | The CHT pump room has a sump to collect spills or leakage. | NSTM 593-4.2.14.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-06 | CHT pumps are located in a dedicated CHT space surrounded by a 2" - 4" coaming. | NSTM 593-4.2.14.(4) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Collection Holding and Transfer Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| CHT-07 | Drip pans or coaming are provided to catch, contain and provide for detection of leakage from valves or joints in health sensitive areas. | NSTM 593-4.2.14.(6) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-08 | Wash up facilities are located in or near the CHT space. | NSTM 593-4.2.14.(7) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-09 | ** Deck discharge connections and the surrounding areas are washed with detergent and hot water after transfer hoses are disconnected. | NSTM 593-4.2.15 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-10 | ** Appropriate protective equipment is used by personnel connecting and disconnecting sewage transfer hoses (e.g., gloves, coveralls, rubber boots). | NSTM 593-4.2.15 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-11 | ** CHT system components and the surrounding area are washed with detergent and hot water on completion of maintenance. | NSTM 593-4.2.15.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-12 | ** Appropriate protective equipment is used by personnel performing maintenance on the CHT system (e.g., gloves, coveralls, rubber boots). | NSTM 593-4.2.15.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Collection Holding and Transfer Checklist (Vessel)

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| | ** Indicates a Significant Program Indicator | | |
| CHT-13 | ** The Gas Free Engineer is notified before maintenance is performed on the CHT system. | NSTM 593-4.2.15.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-14 | ** The Gas Free Engineer is notified in the event of a spill or leak from the CHT and before a tank is opened. | NSTM 593-4.2.15.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-15 | ** EEBDs are located in CHT pump rooms. | COMDTINST M9000.6D, Chapter 555.G.2.e(4) NSTM 593-4.2.1.1, Paragraph 5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-16 | Sewage hoses are flushed with high pressure salt water prior to disconnecting. Hose ends and hose are thoroughly cleaned and hose ends capped prior to storage. Hoses are stored on an impervious rack and physically separated from the potable water hoses. | REF: COMDTINST M6240.5, Chap. 4-C-4.e & 4-C-4.g.(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| CHT-17 | Sewage valve hand wheels are painted gold (Fed Std 595 color number 17043) | COMDTINST M10360.3B, Chapter 11-4-f & Table 11-8 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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Electrical Safety Checklist (Vessel)

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| | ** Indicates a Significant Program Indicator | | |
| ES-01 | A weatherproof connection box has been provided for the shore power system. | 29 CFR 1910.305(e)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-02 | Shore tie outlets are labeled with phase voltage and capacity. | 29 CFR 1910.303(e) / NEC Article 110-21 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-03 | ** Circuits are locked or tagged out when personnel are making wiring or equipment repairs. | COMDTINST 9077.1C Enclosure (1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-04 | ** Dielectric gloves with leather gauntlets are available in work spaces and are tested. | COMDTINST M10550.25A Chapter 4.1.2.5 .and 4.1.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-05 | A shorting probe is located conspicuously and conveniently in all spaces where electronic equipment is installed. It shall be rated at 25,000 volts (NSN 5975-01-029-4176). | COMDTINST M10550.25A, Chapter 4.1.2.3 and M9000.6D, Chapter 077 F.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-06 | Electrical and electronics personnel are trained in CPR. | COMDTINST M10550.25A, Chapters 4.2.6.2 and 4.1.3.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ES-07 | ** All electrical and electronics workbenches which have exposed metal surfaces, are insulated and equipped with a ground buss to reduce the possibility of electrical shock. | COMDTINST M10550.25A, Chapter 4.1.3.21 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-08 | ** The unit has a comprehensive electrical safety program. | COMDTINST M9000.6D, Chapter 077, F | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-09 | Safety precautions and operating instructions are posted on all machinery and equipment that requires more than pressing of a button or the turning of a switch to operate properly and could cause damage to personnel. | COMDTINST M9000.6D, Chapter 077 M.1.and 2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-10 | ** The Cutter has an electrical TAG-OUT program, and crew members are trained in the proper use and application of the program. | COMDTINST M9077.1C | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-11 | ** Ground Fault Circuit Interrupters (GFCI) have been provided for all 120 Volt pier outlets. | NEC Article 555-3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-12 | ** All electrical appliances and tools are inspected prior to issue. | Safe Work Practice | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ES-13 | Portable electrical equipment is inspected, tested, and tagged by an electrician in accordance with scheduled PMS requirements. | COMDTINST M9000.6D, Chapter 077, F.3 & 4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-14 | ** Casualty power cables are in good condition. | NSTM 079-047.1.9, 047-4.2, 047-4.2.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-15 | Securing tools are available at casualty power terminals. | NSTM 079-47.4.2.3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-16 | ** Casualty power cables and terminals are properly marked. | NSTM 079-47.4.2.2.8 and 3.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-17 | ** All non-current carrying metal parts of electrical equipment (e.g., frames, enclosures, conduits) are grounded. | NSTM 300-2.2.1.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-18 | All outlet boxes, junction boxes, and fittings have been provided with covers. | NSTM 300-2.3.1.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-19 | Unused openings in boxes, cabinets, or fittings are effectively closed. | NSTM 300-2.3.1.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-20 | ** Electrical outlets are grounded. | NSTM 300-2.7.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| | ** Indicates a Significant Program Indicator | | |
| ES-21 | ** Ground connections are provided for the housing of all portable electric tools which are not double insulated. | NSTM 300-2.7.3.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-22 | Portable electrical equipment is equipped with a non-metal cased grounded plug. | NSTM 300-2.7.5.1, Paragraph 1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-23 | Electrical outlets indicating over 1 ohm resistance in the ground are replaced or re-wired. | NSTM 300-2.7.6.1, Paragraph 4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-24 | ** A combination eye wash station/deluge shower is available within 25' of battery charging areas. | COMDTINST M5000.7 NSTM 313-2.5.5.6 and 313-2.5.5.5 OSH Act 5(a)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-25 | Appropriate safety and maintenance equipment is stowed in the battery charging areas. | Best Practice | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-26 | Smoking is prohibited in battery charging areas and warning placards are posted. | NSTM 313-2.4.8, Subparagraph 1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-27 | ** Warning placards are posted at casualty power terminals which are normally energized. | NSTM 320-1.2.8.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Electrical Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|----------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| ES-28 | Electrical matting is provided where required (e.g., in the front and rear of propulsion - control cubicles, power and lighting switchboards, interior communications switchboards, test switchboards, fire control switchboards). | NSTM 320-2.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-29 | Wooden grab rails in place at switchboards are properly installed and in good condition. | NSTM 320-2.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-30 | ** Shore power cables are in good condition. | NSTM 320-2.2.7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-31 | Shore power cables are protected from strain, chafing, or other damage. | NSTM 320-2.2.7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-32 | Electrical shore ties are the safety interlock type (cannot be connected or disconnected without first securing power). | NSTM 320-2.2.7.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-33 | ** Battle lanterns are installed and properly directed in the vicinity of switchboards. | NSTM 330-1.9.3.3.(4) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-34 | Relay type battle lanterns are mounted upright, placing relay at the top when mounted. | NSTM 330-1.6.4.3.3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Electrical Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| ES-35 | Portable extension lights are of the watertight explosion-proof type. | NSTM 330-1.9.2.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-36 | ** Battle lanterns are properly located and directed. | NSTM 330-1.9.3.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-37 | Only enclosed fixtures are installed in machinery spaces to minimize the hazard of fire caused by flammable fuels in contact with exposed lamps. | NSTM 330-2.1.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-38 | All exposed metal parts of lighting fixtures are grounded (to ship's hull) at all times. (Figures (NSTM) 330-2-1, 330-2-2, and 330-2-3 illustrate acceptable methods for grounding lighting fixtures, relay lanterns, and portable lights.) | NSTM 330-2.1.9 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-39 | Incandescent lights are properly shielded. | NSTM 330-2.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-40 | ** Only explosion-proof portable extension lights are used in hazardous areas. | NSTM 330-2.1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-41 | Fluorescent lamps are disposed of properly. | NSTM 330-3.3.5.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Electrical Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| ES-42 | The dielectric matting is provided in the vicinity of switchboards at least 3 feet wide. | NSTM 634-3.12.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-43 | The deck underneath portable matting is marked to show the hazard area and stenciled "ELECTRIC GRADE MAT REQUIRED WITHIN MARKED LINES". | NSTM 634-3.12.2.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-44 | Seams in matting are fused or taped underneath and no closer than 3 feet to any electrical hazard. | NSTM 634-3.12.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-45 | Portable electrical tools are inspected, tested, and tagged by an electrician in accordance with scheduled PMS requirements. | COMDTINST M9000.6D, Chapter 077, F.3 & 4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-46 | The tagout log(s) record sheet and index are audited every two weeks. | COMDTINST M9077.1C, Enclosure (1), Paragraph 7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-47 | All stuffing tubes are watertight. | NSTM, Chapter 300-4.6.10.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ES-48 | Extension cords are not used in place of permanent wiring. | 29 CFR 1910.305(g)(1)(iii)(A) OSH Act 5(a)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Electrical Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|--------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| ES-49 | Surge suppressors are utilized that meet shipboard standards. | NSTM 300-2.7.3.5.e | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Engineering Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| ENG-01 | ** The over speed trips have been tested IAW applicable PMS on the main and auxiliary diesel engines. | NSTM 233-13.10.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-02 | Operating instructions are posted in a visible location near or next to equipment that requires more than pressing of a button or the turning of a switch to operate properly. | COMDTINST M9000.6D, Chapter 077, M.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-03 | ** Over speed test results are recorded IAW PMS. Deficiencies are recorded in the machinery history.. | COMDTINST M9000.6D, Chapter 090-C.2.b.(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-04 | ** Spray shields are installed over piping flanges, filters and strainers that contain flammable fluids. And designed to direct spray away from hot surfaces and personnel. | COMDTINST M9000.6D, Chapter 077, K.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-05 | Permanent safety precautions shall be posted in a visible location next to all machinery that could cause damage to personnel, systems or equipment, including any rotating machinery, electrical equipment, eductor systems and internal combustion engines | COMDTINST M9000.6D, Chapter 77 M.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-06 | Air flasks are recertified, including hydrostatic testing every ten years. | NSTM 551-1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Engineering Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| ENG-07 | ** Guards are installed on all rotating machinery, including couplings and exposed shafts, to prevent personnel from becoming accidentally entangled or injured. | NSTM 233-13.1 29 CFR 1910.212(a)(1) OPNAV 5100.19D, Chapter C1303(a) (17 &(18) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-08 | ** Flexible hoses are tagged and replaced In accordance with NEM Chapter 505. | M9000.6, Chapter 505 B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-09 | ** Auxiliary boiler safety relief valves are tested annually. | NSTM 505-9.18.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ENG-10 | Hull history is entered into CM Plus, or into the hull history records for units without CM plus. | COMDTINST M9000.D, Chapter 090-C-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Eye Protection Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|--------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| EP-01 | ** Appropriate emergency eye wash or combination eye wash / emergency shower stations are located within 10 seconds or 100 feet of eye-hazard areas. | ANSI Z358.1, Article 4.6.1 and 5.4.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-02 | ** Permanently installed emergency eye wash stations that are serviced by water from the Cutter's fresh water piping are operated weekly to confirm operation and flush the line. | ANSI Z358.1, Article 5.5.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-03 | ** Self-contained eye wash stations are capable of flushing the eyes with 0.4 gpm for 15 continuous minutes. | ANSI Z358.1, Article 5.1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-04 | Eye wash stations are well lighted and identified with a highly visible sign. | ANSI Z358.1, Article 5.4.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-05 | The water in non-permanently installed portable emergency eye wash stations is changed monthly or treated with a bacteriostat and changed in accordance with the manufacturer's instructions. | ANSI Z358.1, Article 5.5.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-06 | ** Personnel are familiar with the proper use of eye protection and the hazards to their eyes associated with various evolutions and maintenance procedures. | COMDTINST M5000.7, Chapter 3-26-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Eye Protection Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| EP-07 | ** Work areas / operations have been surveyed to: identify eye hazards, personnel requiring eye protection, and type of eye protection required. | COMDTINST M5000.7, Chapter 3-26-1 / 29 CFR 1910.132(d)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-08 | ** Eye-hazard areas are posted with warning signs. | 29 CFR 1910.145(c)(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-09 | Eyewash units are inspected and maintained in accordance with manufacturer's instructions. Plumbed equipment shall be activated weekly to verify proper operation. | ANSI Z358.1, Article 5.5.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| EP-10 | Eyewash stations are maintained and caps are in place over nozzles. | ANSI Z358.1, Article 5.1.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|-----------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| FS-01 | ** The Cutter Damage Control Officer has contacted the local fire department and other key fire fighting facilities to ensure they have the companion flange to the International Shore Connection (ship) in the event of an emergency. | COMDTINST M9000.6D, 555-F-11.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-02 | ** Repair lockers are properly equipped, well organized, and properly stowed, and an Alphabetical Location Index is posted on the door. | COMDTINST M9664.1, Cover Letter | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-03 | Warning signs are posted cautioning personnel against entering spaces flooded by CO2. | NSTM 555-2.8.2.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-04 | Fixed CO2 flooding systems are equipped with pressure switches to secure the ventilation in the protected space and energize audible and visual alarms. | NSTM 555-3.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-05 | Training is conducted to ensure all crew members are aware of the hazards associated with HALON. | COMDTINST 6260.21B, Paragraph 7-b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| FS-06 | ** All portable gasoline containers are painted red and the name of the liquid contents painted on each in yellow letters. 55 gallon drums are painted yellow with the name of the liquid contents painted on each in black letters. | COMDTINST M10360.3B, Chapter 10.B.1.c. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-07 | 55 gallon gasoline drums used for carrying gasoline are mounted on the weather deck in a quick-release rack, are out of line-of-fire from armament, and away from ventilator ducts, doors, and hatches. | COMDTINST M9000.6D, Chapter 540, A-2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-08 | Gasoline is carried in approved safety cans or in the fuel tank provided with the equipment, and stowed on the weather deck (aft, if possible). Empty or partially filled containers are drained completely or refilled as soon as possible. | COMDTINST M9000.6D, Chapter 540, A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-09 | "NO SMOKING" signs are posted in gasoline powered boats and on gasoline rack. | COMDTINST M9000.6D, Chapter 077, N-2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-10 | All compressed gas cylinders carried on board are of the non-shatterable type. | COMDTINST M9000.6D, Chapter 550, E | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-11 | OBA canisters are stowed flat with the concave side down or vertically with the copper seal up. | COMDTINST M9000.6D, Chapter 555, G.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FS-12 | Type A-4 OBA's are stowed horizontally in an approved locker or case. | COMDTINST M9000.6D, Chapter 555, G.1, NSTM Chapter 077-3.2.10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-13 | Canisters for the Type A-4 OBA's are green, single candle, self starting , and training canisters red and for training purposes only and not stored in repair lockers. | COMDTINST M9000.6D, Chapter 555, G.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-14 | ** Compartment Check-off Lists are current, properly posted in each compartment, and kept in a central file. | COMDTINST M9000.6D, Chapter 079, F.2.b.(3)(f) and F.2.c. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-15 | Installed or stowed compressed gas cylinders are visually inspected semiannually, and hydrostatically tested every 12 years or whenever discharged and over 5 years have elapsed since the last hydrostatic test. | COMDTINST M9000.6D, Chapter 550, A & B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-16 | The Cutter is outfitted with the appropriate number of Fire Fighting Ensembles (FFE's). | COMDTINST M9664.1, Paragraph 4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-17 | The discharge nozzles for the CO2 flooding system are located 1/3 of the height of the compartment from the deck and are unobstructed. | GSO 555.b.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FS-18 | The flammable liquid storeroom is equipped with a fixed CO2 flooding system. | GSO 555.b.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-19 | ** Natural and / or mechanical vent systems servicing flammable liquid storage cabinets and store-rooms are fitted with suitable flame arrestors. | NSTM 510-7.1.10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-20 | ** Emergency lighting (relay lantern) is installed as required in reference. | NSTM 330-1.9.3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-21 | ** The Commanding Officer has promulgated a Cutter Machinery Space Fire Doctrine (MSFD) included as Chapter 4, Part B in the Casualty Control Manual. | COMDTINST M9000.6D, Chapter 079, J.1. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-22 | 5 gallon AFFF containers are stacked no more than two high, except in accordance with fleet drawing FL-3000-13. | COMDTINST M9000.6D, Chapter 555.E.4.a. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-23 | Individual compressed gas cylinders are secured in the upright position by "metal collars." | NSTM 550-2.48.(g) and 550-2.11 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-24 | Oxygen and acetylene are stowed apart from each other, in accordance with reference. | NSTM 550-2.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| FS-25 | All PKP fire extinguisher containers are hydrostatically tested every 12 years or when the strength of the container is questionable due to damage from corrosion or rough handling. | COMDTINST M9000.6D, Chapter 550, B.3.d / TECH PUB 2006B, MPC # R-C-1587 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-26 | CO2 flooding system cylinders are secured with individual collars. | NSTM 550-2.48.(g) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-27 | ** A discharge time delay (see NSTM Figure 555-3-15) is installed in the piping on all CO2 total flooding systems to provide adequate time for personnel to evacuate the space. | NSTM 555-3.2.1.10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-28 | ** Limited in-use quantities of Category I flammables are stowed in locked flammable material issue rooms, ready service storerooms, or approved flammable liquid cabinets. | NSTM 670-4.4.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-29 | When in-use quantities of Category II combustibles are not stored in an approved cabinet, they are limited to 12 gallons and stowed within a coaming of 12 gallon capacity. | NSTM 670-4.5.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-30 | ** Oxidizing materials are stowed separately from flammables and combustibles. | NSTM 670-4.3.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|--|--|
| | ** Indicates a Significant Program Indicator | | |
| FS-31 | During strip ship condition, all necessary flammables and combustibles shall be offloaded. Those necessary for the ship's operation shall be removed from in-use stowage facilities and placed in the ship's flammable liquids storeroom. | NSTM 670-4.3.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-32 | Instructions for restarting the ventilation systems in compartments protected by CO2 flooding systems are posted. | TECH PUB 2006 MPC-R-C-004 / GSO 555.b.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-33 | ** Operating instructions and safety precautions are posted for fixed CO2 systems. | TECH PUB 2006 MPC-R-S-003 / GSO 555.b.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-34 | ** Nylon jacketed hoses are hydrostatically tested annually. | TECH PUB 2006B MPC-R-A1562 TECH PUB 2006B MPC-R-M-001 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-35 | ** Portable extinguishers and CO2 cartridges are weighed semiannually. | TECH PUB 2006B MPC-R-S-1643 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-36 | Portable extinguishers are located in the vicinity of the flight deck equipped with plastic seals, and the weight data is recorded in a log vice on a tag. | Recommendation | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FS-37 | CO2 flooding system release mechanisms are protected against accidental discharge. | NSTM 555-3.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-38 | ** 50 LB CO2 cylinders are weighed when installed and annually thereafter. | TECH PUB 2006B MPC-R-A-1570 / NSTM, Chapter 555-4.2.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-39 | Evacuation warning signs are posted in spaces protected by CO2 flooding systems. | TECH PUB 2006B MPC-R-A-1646 / NSTM, Chapter 555-3.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-40 | ** CO2 flooding system pull boxes (local and remote) are identified. | TECH PUB 2006B MPC-R-S-1646 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-41 | Portable CO2 extinguishers are hydrostatically tested every 5 years or taken out of service. | COMDTINST 9000.6D, Chapter 550, B.3.a / TECH PUB 2006B MPC # R-C-1588 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-42 | 100% of all exterior and 20% of all interior PKP extinguishers are operated annually. | TECH PUB 2006B MPC-R-A-1564 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-43 | ** Where fixed fire and smoke alarm systems are not provided, self-contained smoke detectors shall be installed in living and berthing compartments and passageways.. | COMDTINST M9000.6D, Chapter 077, L.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| FS-44 | ** Gas bottles are stowed with safety covers over the valves, and regulators are disconnected and covers attached when bottles are not in use. | NSTM 550-2.10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-45 | Photoluminescence markings mounted above all portable CO2 and PKP fire extinguishers | COMDTINST M10360.3B, Chapter 10.C.2.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-46 | Portable CO2 fire extinguishers are inspected monthly | TECH PUB 2000.6B MPC R-M-1606 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-47 | The transfer of flammable liquids, such as paints and solvents, is only conducted with containers bonded together and grounded. | COMDTINST M10360.3B, Chapter 2.D.2.a.1.i NFPA 30, Article 5-9.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-48 | Inspect, test and document tests/inspections of battle lanterns quarterly, as per PMS | CG Tech. Pub. 2006, R-Q-1636 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-49 | OBA are stored with face mask inserts are in place. | CG Tech. Pub. 2006, R-M-1611 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-50 | Only bedding material meeting MILSTD requirements are used/allowed onboard cutter (e.g., no sleeping bags). | NSTM 555-1.2.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Fire Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FS-51 | ** OBAs are inspected according to PMS. | CG Tech. Pub. 2006B, R-M-1611 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-52 | The synthetic glass in the emergency pipe repair kits has not expired. | TECH PUB 2006B, MPC R-Q-1632 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-53 | OBAs having tennerman clamps with out the tool have been replaced with the worm gear style Clamps. | R151538z MAY 95, SUBJ. NAVSEFECEN safety advisory 07-95 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-54 | OBA breathing bag waist strap has been modified requirements. | R151538z MAY 95, SUBJ. NAVSEFECEN | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-55 | Portable PKP fire extinguishers are inspected quarterly | TECH PUB 2000.6B, MPC R-Q-1625 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FS-56 | PKP extinguisher CO2 cartridge are weighed annually | TECH PUB 2006B, MPC R-A-1576 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-01 | All equipment and utensils used in food service facilities shall be made of sanitary, nontoxic, corrosion-resistant materials and so designed constructed, and installed as to provide for ease of cleaning. | COMDTINST 6240.4A, Chapter 4.A.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-02 | ** Food shall be obtained from sources approved by the U.S. Dept. of Agriculture or an approved source from a foreign port that complies with all laws relating to food and food labeling. | COMDTINST M6240.4A, Chapter 2.A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-03 | All walk-in reefer boxes, lockers, freezers, and chill spaces have an electric alarm system installed. The alarm sounds a bell and illuminates a red lamp indicator on the mess deck and one outside the space. | COMDTINST 9000.6D, Chapter 077 C | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-04 | The circuit breaker used for emergency shutdown is painted red. The equipment or service controlled and the applicable voltages ex. Deep Fat Fryer will be stenciled in yellow on the base of the breaker box. | COMDTINST M10360.3B, Chapter 10.B.1.f | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-05 | ** There shall be no direct connection between the sewage system and any drains originating from equipment in which food, portable equipment, or utensils are placed, to include dishwashing machines. | COMDTINST M6240.4A, Chapter 6.C.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-06 | ** Potentially hazardous leftovers must be labeled "Leftover Use Within 24 Hours" with the date and time of original preparation and the discard date and time. | COMDTINST M6240.4A, 2.J.3.d.(4) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-07 | ** An air gap between the water supply inlet and the flood level rim of the plumbing fixture, equipment, or non food equipment shall be at least twice the diameter of the water supply inlet and may not be less than 25 mm (1 inch). | Food Code 2001, Chapter 5, 5-202.13, and 5-203.14 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-08 | A representative of the medical department or a food service officer is designated by the CO and conducts weekly sanitation inspections of the food preparation, storage, and serving spaces. | COMDTINST M6240.4A, Chapter 11.A.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-09 | ** The medical department representative or other qualified personnel designated by the commanding officer is responsible for inspecting all food stuffs to determine fitness for human consumption and to ensure receipt from approved sources. | COMDTINST M6240.4A, Chapter 2.C.1.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-10 | Only food items shall be stored in food storage spaces. Storage of non-food items such as medications, vaccines, batteries, glue, greases, urine samples, etc. in reefer spaces is prohibited. | COMDTINST M6240.4, Chapter 2.D.1.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-11 | ** Stored foods, whether raw or prepared, shall be enclosed in the clean container or packaged in which they were obtained or shall be enclosed in a clean covered container, except during necessary periods of preparation or service. | COMDTINST M6240.4A, Chapter 2-D.1.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-12 | Food is stored at least 6 inches off the deck on a clean surface and protected so that the clean food items will not be contaminated by splash or other means. | COMDTINST M6240.4A, Chapter 2-D.1.e | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-13 | ** Food not subject to further washing or cooking before serving shall be stored in a way that protects it against contamination from food requiring washing or cooking. | COMDTINST M6240.4A, Chapter 2-D.1.g. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-14 | Decayed items are sorted out and removed from fresh fruits. Food items such as eggs and butter which absorb odors should not be stored with fruits and vegetables. | COMDTINST M6240.4A, Chapter 2-D.1.j | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-15 | ** Temperatures in refrigerators are maintained at 41 degrees F or below. Freezers are maintained at a temperature of 0 degrees F or below.. | COMDTINST M6240.4A, Chapter 2-D.2.b and c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-16 | Each hot food storage facility shall be provided with a numerically scaled indicating thermometer, accurate to plus or minus 3 degrees F, located in the coolest part of the facility and located to be easily readable. | COMDTINST M6240.4A, Chapter 2-D.3.a. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-17 | ** Hot storage facilities shall be maintained at or above 140 degrees F except during necessary periods of preparation. | COMDTINST M6240.4A, Chapter 2-D.3.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-18 | ** Potentially hazardous foods shall be kept either 41 degrees F or below; or 140 degrees F or above during display and service. | COMDTINST M6240.4A, Chapter 2.F.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-19 | ** Fresh fish and shellfish are inspected, tagged, and packed as required. | COMDTINST M6240.4A, Chapter 2-C-3.a-c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-20 | ** Fresh crustaceans (e.g., mollusks, lobster, crab, clams) are alive when procured. | COMDTINST M6240.4A, Chapter 2.C.3.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-21 | Fruits and vegetables are fresh when procured and served and meet minimum USDA requirements as defined in the reference for each product. | COMDTINST M6240.4A, Chapter 2.C.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-22 | ** Dry food shall be inspected for correct can labeling, condition of exterior can, signs of rusting, and other conditions. | COMDTINST M6240.4A, Chapter 2.D.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-23 | Refrigeration facilities are equipped with separate internal thermometers. | COMDTINST M6240.4A, Chapter 2.D.2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-24 | Ice making machines shall be located, installed, operated, and maintained in a sanitary manner to prevent contamination. Ice for consumer use shall be dispensed only with scoops, tongs, or ice dispensing utensils or through self ice dispensing equipment | COMDTINST M6240.4A, Chapter 2.G | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-25 | Condiments are in approved self-service dispensers and cleaned after each meal. | COMDTINST M6240.4A, Chapter 2.F.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-26 | Written instructions for equipment operation and standing sanitary rules shall be posted in conspicuous places. | COMDTINST M6240.4A, Chapter 3.F.2.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-27 | Only those toxic or poisonous materials required to maintain the foodservice areas in a sanitary condition are present and properly labeled. Poisonous or toxic materials are stored in a locked cabinet or in an area away from foodservice operations. | COMDTINST M6240.4A, Chapter 7.G | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-28 | Only articles necessary to the operation and maintenance of the food service establishment are stored in the galley. | COMDTINST M6240.4A, Chapter 7.H.1.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-29 | Grills, fryer hoods, and vents are kept grease free and the grease filters in range hoods are in place at all times while the range is in operation. | COMDTINST M6240.4A, Chapter 4.B.6, & Enclosure (1), 27 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-30 | ** Salad bar and self-service guidelines are followed and food is protected from contamination. Sneeze guards are in place and properly installed where required. The number of utensils are adequate. | COMDTINST M6240.4A, Chapter 10.A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-31 | ** All food service personnel, shall be determined to be free from communicable diseases prior to assignment in food service areas. Regular and reserve FS and food handlers will be vaccinated with Hepatitis A vaccine. | COMDTINST M6240.4A, Chapter 3.B.1 COMDTINST 6230.8A, Paragraph 6(a)(4) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-32 | Foodservice sanitation training was conducted. | COMDTINST M6240.4A, Chapter 12 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-33 | ** Equipment and utensils are properly cleaned and sanitized. | COMDTINST M6240.4A, Chapter 5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-34 | ** The following temperatures (in degrees F.) are maintained for all cycles of the mechanical dishwashing machines using hot water sanitizing: wash cycle 140-160; rinse cycle 165-180; and final rinse cycle 180-194. | COMDTINST M6240.4A, Chapter 5.A.5.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-35 | ** Mechanical cleaning and sanitizing machines are adequate, properly installed, and temperatures maintained. | COMDTINST M6240.4A, Chapter 5.A.4 thru 5.A.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-36 | ** Equipment and utensils are properly handled and stored. | COMDTINST M6240.4A, Chapter 5.B.1 thru 5.B.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-37 | ** Adequate toilet and hand washing facilities are available, easily cleaned, enclosed with tight fitting doors, kept in a clean condition, are in good repair, and have adequate ventilation. | COMDTINST M6240.4A, Chapter 6.D | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-38 | ** Garbage and refuse is collected, stored, and disposed of properly. | COMDTINST M6240.4A, Chapter 6.F.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-39 | Bulkheads and decks are easily cleaned and in good repair. All surfaces are kept clean with decks being cleaned after each meal using a dustless method. Cleaning is conducted when the least amount of food is exposed. | COMDTINST M6240.4A, Chapter 7.A thru 7.C | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-40 | Lighting is adequate and fixtures are shielded or otherwise constructed to protect against broken glass contaminating food. | COMDTINST M6240.4A, Chapter 7.D | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-41 | Temperatures on deep fat fryers should not exceed 400 degrees F and checked daily. | NSTM 651, 651-2.12.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-42 | When there is not a permanently installed APC fire protection system for the deep fat fryer, alternate means of fighting the fire, such as using an 18 lbs. PKP fire extinguisher, as outlined in NSTM 555-8.4 are followed. | NSTM 555-8.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-43 | Backup methods for extinguishing deep fat fryer fires are used only in the event the APC system fails to operate and extinguish the fire. (Three methods are available and should be used in order of priority listed in NSTM 555-8.4.) | NSTM 555-8.4.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-44 | ** Potentially hazardous foods which have been held between 41 degrees F and 140 degrees F longer than four hours are considered unsafe and are destroyed. | COMDTINST M6240.4A, Chapter 2.J.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-45 | ** Temperature logs are maintained on all cold storage spaces and accurate entries are made at least daily. | COMDTINST M6240.4A, Chapter 2.D.2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-46 | ** Cloths that are used for wiping food spills shall be used for no other purpose. Wet wiping cloths must be stored in a sanitized solution between uses. Cloths must be washed and sanitized after each meal period. | COMDTINST M6240.4A, Chapter 5.A.2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-47 | The pressure of water supplied to spray-type dishwashing machines is 15 - 25 psi on the water line at the machine and not less than 10 psi at the rinse nozzle. | COMDTINST M6240.4A, Chapter 5.A.4.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-48 | ** Chemicals used for sanitization do not have a concentration higher than the maximum permitted by the FDA. A test kit or other device that accurately measures the ppm and pH concentrations of solutions is used. | COMDTINST M6240.4A, Chapter 5.A.3.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-49 | ** Food service personnel do not handle money and prepare or serve food as one delegated function. | COMDTINST M6240.4A, Chapter 3.E.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-50 | ** Sandwiches prepared in Coast Guard dining facilities intended to be consumed in-flight or on boats are prepared and handled as prescribed in Chapter 10-C-1 of the Food Service Sanitation Manual. | COMDTINST M6240.4A, Chapter 10-B.2.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-51 | Steam jacketed kettles operate on a maximum pressure of 45 psi. When the pressure in the galley steam line exceeds 45 psi, pressure relief valves are installed and set to go off at 45 psi and tested daily. | NSTM 651-2.31.2.a.1. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-52 | Frost or ice on refrigerator coils shall not exceed one-fourth of an inch. | COMDTINST M6240.4A, Chapter 5.A, Paragraph A.1.h.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-53 | ** Dry foods are inspected prior to coming onboard to ensure stores are free from pest infestations. | COMDTINST M6240.4A, Chapter 2.C.6.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-54 | ** Accurate, easily readable, numerically scaled therometers are provided to indicate the temperatures of each tank in the dishwashing machine and the rinse water as it enters the manifold. | COMDTINST, M6240.4A, Chapter 5.A.4.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-55 | The use of steel wool for cleaning equipment and utensils is prohibited. | COMDTINST, M6240.4A, Chapter 5.C.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-56 | ** Hoses are not connected to deep sink spigots, unless spigots are equipped with vacuum breakers. | COMDTINST M6240.4A, Chapter 6.C.5.c.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-57 | A "Wash Your Hands" poster is provided in the washroom and at other appropriate locations. | COMDTINST M6240.4A, Chapter 3.F.2.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-58 | ** Clean and sanitized equipment and utensils shall be handled in a way that protect them from contamination. Utensils shall be washed with handled down and inverted to storage containers with handles up. | COMDTINST M6240.4A, Chapter 5.B.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-59 | Cups, bowls, glasses, plates, etc. shall be stored inverted in racks or in closed cabinets. | COMDTINST M6240.4A, Chapter 5.B.2.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-60 | Rapid cooling of leftovers will be accomplished by using one or more of the following methods to bring the product temperature from the required cooking temperature to 41 degrees F or below within a 4 hour period. | COMDTINST M6240.4A, Chapter 2.J.3.d.(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-61 | A minimum utensil surface temperature of 160 degrees F must be achieved. | COMDTINST M6240.4A, Chapter 5.A.5.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-62 | Packaged food shall not be stored in contact with water or undrained ice. | COMDTINST M6240.4A, Chapter 2.D.1.h | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Food Service Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| FSG-63 | At all times food shall be protected from contamination by all agents, including dusts, insects, unclean equipment and utensils, unnecessary handling, coughs, sneezes, flooding, draining and overhead leakage or condensation. | COMDTINST M6240.4A, Chapter 2.B.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-64 | Wood blocks and wood cutting boards shall not be used and shall be removed from all food service areas. | COMDTINST M6240.4A, Chapter 4.A.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-65 | Dispenser cabinets shall be defrosted at frequent intervals to prevent accumulation of more than three sixteenth inch of ice. | COMDTINST M6240.4A, Chapter 2.E.1.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-66 | Single service tubes shall be cut with a clean cutting instrument at a point no more than one inch beyond the termination of the dispensing mechanism and at a forty-five degree angle. | COMDTINST M6240.4A, Chapter 2.E.1.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-67 | Common soap bars, towels, and rotating cloth towels are prohibited. | COMDTINST M6240.4A, Chapter 6.E.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| FSG-68 | Sinks used for washing utensils, equipment, or food preparation are not used for handwashing. | COMDTINST M6240.4A, Chapter 6.E.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Gas Free Engineering Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| GFE-01 | ** All potential confined spaces have been identified. | Recommendation, see: NSTM 074-20.10 and Appendix I | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-02 | ** All confined spaces are considered hazardous. Entry into, or work in or on, such spaces is restricted as specified on the posted gas free certificates. | NSTM 074-19.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-03 | ** The GFE/GFPO certifies all confined spaces as safe for entry and/or hot-work. | COMDTINST M9000.6D, Chapter 077, B.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-04 | ** The Navy Gas Free Certificate is used for documenting confined space testing and retesting. | COMDTINST M9000.6D, Chapter 077 B.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-05 | Navy Gas Free Certificates are retained for one year. | NSTM 074, Volume 3, Chapter 074-18.16 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-06 | ** Entry into confined spaces that may be immediately dangerous to life or health (IDLH) atmospheres (e.g., fuel, CHT tanks) is only performed in an extreme emergency and each entry is personally authorized by the Commanding Officer. | COMDTINST M9000.6D, Chapter 077 B.4 Note 3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Gas Free Engineering Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| GFE-07 | Contaminated air is exhausted to a safe location on the weather decks away from make-up air intakes. | NSTM 074-21.6.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-08 | ** The combustible gas meter is available and in good working order. | NSTM 074-27 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-09 | ** An oxygen meter is available and is maintained in good working order. | NSTM 074-27 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-10 | A detector tube sampling pump is available and in good working order. Sample tubes are from the same manufacturer as the pump and have not exceeded the expiration date. | NSTM 074-L.2.1.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-11 | All personnel involved, or potentially involved, in confined space entry are trained on hazards, entry limitations, and responsibilities. | NSTM 074, Volume 3, Chapter 3-18.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| GFE-12 | All ship's personnel receive GFE familiarization during shipboard indoctrination and annually thereafter. | NSTM, Volume 3, Chapter 074-18 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Gas Free Engineering Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| GFE-13 | All personnel involved in confined space entry and rescue, participate in semi-annual training and rescue drills. | NSTM 074, Volume 3, Chapter 3-25.7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
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Hazard Communication Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| HC-01 | ** The Commanding Officer has promulgated a unit instruction concerning the procurement, storage, use, and disposal of hazardous materials. | COMDTINST 16455.10, Cover Letter Paragraph 7-a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-02 | ** A written Hazard Communication Program has been developed for the unit. | COMDTINST 6260.21B, Paragraph 6-b-3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-03 | ** Material Safety Data Sheets (MSDS) are maintained for all hazardous materials procured. | COMDTINST 6260.21B, Paragraph 6-b-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-04 | All affected members have received initial hazard communication training and annual hazard communication refresher class. | COMDTINST 6260.21B, Paragraph 7-b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-05 | All affected members understand the methods to protect personnel. | COMDTINST 6260.21B, Paragraph 5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-06 | ** MSDS or the required hazardous chemical information is readily accessible to personnel during each work shift. | COMDTINST 6260.21B, Paragraph 6-b-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-07 | The Cutter maintains a Hazardous Materials / Chemicals Inventory. | COMDTINST 6260.21B, Paragraph 6-b-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Hazard Communication Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| HC-08 | Independently moored vessels meeting the EPCRA reporting thresholds, have notified local and state agencies as required. | COMDTINST 16455.10, Chapter 5.A.1.and 2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-09 | Storage containers for hazardous materials are labeled, tagged or marked with the contents, principal hazard, effects of overexposure on target organs, and manufacturer's or importer's name and address. | COMDTINST 6260.21B, Paragraph 6-b-4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-10 | A procedure has been implemented to ensure that hazard warning labels are placed on all containers upon receipt. | COMDTINST 6260.21B, Paragraph 6-b-4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-11 | ** Purchases of hazardous materials are reviewed by the Hazardous Materials Coordinator. | COMDTINST 6260.21B, Paragraph 6-b-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-12 | ** Training is provided on initial assignment of personnel or whenever a new hazard is introduced into the workplace. | COMDTINST 6260.21B, Paragraph 7-b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-13 | All affected members understand how to detect the presence of hazardous chemicals in the work area. | COMDTINST 6260.21B, Paragraph 7-b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Hazard Communication Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| HC-14 | All affected members know the location and availability of the written hazard communication program, including inventory and MSDS. | COMDTINST 6260.21B, Paragraph 7-b-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-15 | Hazard communication training is documented in unit and individual training records. | COMDTINST 6260.21B, Paragraph 7-d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-16 | Personnel are made aware of the potential health hazards associated with particular materials / chemicals, and the safety requirements associated with their use before being assigned to use them. | COMDTINST 6260.21B, Paragraph 8-b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-17 | The unit maintains a Hazardous Materials Management System (HMMS). | COMDTINST M16455.10 Cover Letter, Paragraph 7-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-18 | The unit keeps adequate records to prepare annual Pollution Prevention Scoring System Reports. Previous calendar year reports have been submitted. | COMDTINST M16455.10, Chapter 2-B-1 and 4-C-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HC-19 | Hazardous materials / chemicals are stored in accordance with current regulations and according to hazards associated with the material / chemical. | NSTM 670-2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Hazard Communication Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| HC-20 | ** Hazardous material containers are kept closed when not in use. | NSTM, Chapter 670-4.3.1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Hearing Conservation Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| HP-01 | Hazardous Condition notifications (CG-5082) are utilized to report hazardous noise areas which require noise abatement modifications. | COMDTINST M5100.47, Enclosure (1).2.a.2 and 2.c.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-02 | ** The Cutter provides, and requires the use of, hearing protective devices when personnel enter or work in noise hazardous areas (greater than 84 dBA continuous or 140 dBA peak sound level). | COMDTINST M5100.47, Chapter 4-I-3.a.(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-03 | All personnel exposed to hazardous noise receive initial (minimum of 1 hour) and annual refresher training in hearing conservation practices. | COMDTINST M5100.47, Chapter 4-I-4.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-04 | Class B mishap reports (MISREP) are submitted for occupational illness or injury resulting in a permanent partial disability. (For example: noise induced hearing loss resulting in permanent significant hearing threshold shift.) | COMDTINST M5100.47, Chapter 3-F-4.b.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-05 | ** Hazardous noise areas, stationary equipment and sources of hazardous noise are properly labeled or posted. | COMDTINST M5100.47, Chapter 4-J-2.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Hearing Conservation Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| HP-06 | ** Personnel enrolled in the Hearing Conservation Program (HCP) are receiving annual audiograms. | COMDTINST M6000.1, Chapter 12-F.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-07 | ** All required personnel have been identified for inclusion in the Hearing Conservation Program (HCP). | COMDTINST M6000.1, Chapter 12-F.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-08 | Abnormal audiograms of personnel enrolled in the Hearing Conservation Program (HCP) are forwarded to G-WKS-3. | COMDTINST M6000.1, Chapter 12-F.6.A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HP-09 | The unit submits a Disease Alert Report to G-WKS-3 when a neurosensory hearing loss is diagnosed. | COMDTINST M6000.1, Chapter 7-B.3, Fig.7-B-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Heat Stress Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|--------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| HS-01 | ** Cutters with manned spaces having an ambient temperature that exceeds 100 degrees F. have implemented a heat stress program. | COMDTINST M6260.17, Cover letter 4.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-02 | ** Heat stress meters are calibrated annually. | COMDTINST M6260.17, Chapter 2-E | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-03 | ** The WBGT Meter is validated (results from the meter against manually-calculated values) each time it is used. | COMDTINST M6260.17, Chapter 2-D | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-04 | ** Dry bulb thermometers are mounted in key internal watch and work stations such as the main machinery, main engine room, auxiliary machinery, laundry, and scullery spaces. | COMDTINST M6260.17, Chapter 3-B-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-05 | ** Dry-bulb temperature readings are taken at key internal watch and work stations at 1000, 1200, 1400, and otherwise once every 4-hour watch. Results are recorded in the Machinery Log. | COMDTINST M6260.17, Chapter 3-B-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-06 | ** The EOW and Health Services Technician (if assigned) is notified if the dry bulb temperature exceeds 100 degrees F. at any location. | COMDTINST M6260.17, Chapter 3-B-3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Heat Stress Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| HS-07 | ** A Wet-Bulb Globe Temperature is taken when dry-bulb readings exceed 100 degrees F., using a properly maintained WBGT meter. | COMDTINST M6260.17, Chapter 3-B-4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-08 | ** Personnel are removed from a heat stress situation when required for the specified period of time. | COMDTINST M6260.17, Chapter 3-B-8 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-09 | The Cutter submits a Mishap Report (MISREP) on heat stress related illnesses. | COMDTINST M6260.17, Chapter 3-B-9 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-10 | ** The Cutter has personnel on board trained in heat stress monitoring and familiar with the use of the Wet Bulb Globe Temperature (WBGT) meter. | COMDTINST M6260.17, Chapter 4-A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| HS-11 | The Cutter submits a Hazard Condition Notification (CG-5082), in addition to a CSMP, if a heat stress situation exists beyond the Cutter's capability to correct. | COMDTINST M6260.17, Chapter 3-B-10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Ladder Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|-----------------|--|
| | ** Indicates a Significant Program Indicator | | |
| LLRD-01 | Stanchions stowed inside the ship are adjacent to the hatches for which they are intended. | GSO 612.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-02 | Stanchion sockets or bulkhead pad eyes are provided at all hatches so lifelines can be rigged around them. | GSO 612.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-03 | Unguarded openings between adjacent sections of life rails or lifelines, or between the ends of the rails or lines and adjacent structures, are no greater than five inches. | GSO 612.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-04 | Climber safety rails are installed at each permanently installed topside ladder on masts, king posts, and similar topside structures. | GSO 622.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-05 | Steel ladders are used for all machinery space access. | GSO 622.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-06 | Three slip-resistant self-adhesive treads with no space between them are installed at the head and foot of ladders, on each side of doors used for continuous traffic, and at both sides of doors in crews messing. | NSTM 634-3.21.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Ladder Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| LLRD-07 | ** Ladders are securely bolted in place. | COMDTINST M5000.7, Chapter 3-2-1.A (2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-08 | Deck panels are secured to the supporting framework by clips or bolts. The design and fit of the securing clips or bolts provides positive locking and ready disassembly. Clips or bolt do not extend above the surface of the grating. | REF: GSO 622.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-09 | Photo luminescent tape is installed on the lower half of escape ladders | COMDTINST M10360.3B, Chapter 10.C.3.d. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LLRD-10 | Wire rope used in standing rigging and lifeline applications are visually inspected for obvious deficiencies or defects on a routine basis. Wire rope that may come in contact with personnel is inspected more frequently. | COMDTINST M9006.D, Chap. 613-A-4 and 613-A-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Laundry Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| LND-01 | The placard "Prevent Laundry Dryer Fires" NSN 0177-LF-008-8200 is posted on the front of each dryer. | GSO 655 B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-02 | Dryers have a primary lint trap installed and maintained free of tears or other defects. | NSTM, Chapter 655.1.10.6.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-03 | Install/replace protective covers and/or guards on laundry equipment moving parts. | NSTM 655-1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-04 | Personnel are familiar with posted operating instructions. | NSTM 655-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-05 | There is a secondary lint filter installed between the dryer exhaust duct and the ship's ventilation system. | NSTM 655-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-06 | Clothes dryers are operated within acceptable temperature limits. | NSTM 655-2.36 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| | Clothes dryers are installed with metal exhaust ducting. | MFG instructions for clothes dryers. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-07 | Install coaming around washer/extractor. | GSO 655 B | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: _____ | OPFAC: _____ | Date: _____ |
| Shop/Area: _____ | Unit POC For This Checklist: _____ | |

Laundry Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| LND-08 | Repair washer/extractor door interlocks. | NSTM 655-1.37 Manufactures Tech. Manual | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-09 | All steam piping in laundry rooms are properly lagged | NSTM 505-8.2.4 NSTM 635-1.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-10 | Laundry presses are two handed presses. | NSTM 655-1.8 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-11 | Dryer vents are connected to metal exhaust ducting where they terminate to the exterior. | OSHA Act (5)(a)(1), Manufacturer's directions | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-12 | The dryer's primary lint trap is cleaned before each use or every two hours (which ever is more frequent). | NSTM, Chapter 655.10.8.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-13 | The dryer's secondary lint trap is cleaned every eight hours of use and at the end of the work day. | NSTM, Chapter 655.10.8.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| LND-14 | Laundry equipment is equipped with guards to prevent contact or entanglement in or with moving parts. | NSTM 655-1.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Machine and Moving Mechanical Parts Checklist

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|-----------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| MMP-01 | ** Guards are provided to protect the operator and other personnel from hazards created by point of operation, ingoing nip points, rotating parts, flying chips, and sparks. | 29 CFR 1910.212 (a)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-02 | The point of operation that exposes an employee to injury is guarded. | 29 CFR 1910.212 (a)(3)(ii) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-03 | The guarding device is designed and constructed to prevent the operator from having any part of his/her body in the danger zone during the operating cycle. | 29 CFR 1910.212 (a)(3)(ii) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-04 | Special hand tools (e.g., push sticks) for placing and removing material are provided to permit easy handling of material without the operator placing a hand in the danger zone. | 29 CFR 1910.212 (a)(3)(iii) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-05 | Special hand tools are used to supplement protection provided and not in lieu of other required guarding. | 29 CFR 1910.212 (a)(3)(iii) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-06 | The point of operation on cutters, shears, presses, milling machines, saws, joiners, portable and power tools is guarded. | 29 CFR 1910.212 (a)(3)(iv) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Machine and Moving Mechanical Parts Checklist

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| MMP-07 | When the periphery of the blades of a fan are less than 7 feet above the floor or working level, the blades are guarded. | 29 CFR 1910.212 (a)(5) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-08 | Fan guards have openings no larger than one-half inch. | 29 CFR 1910.212 (a)(5) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-09 | Machines that are designed for a fixed location are securely anchored to prevent walking or moving. | 29 CFR 1910.212 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-10 | All power presses have appropriate point of operation guards, sized according to the distance between the guard and the point of operation hazard. | 29 CFR 1910.217 (c)(2)(i) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-11 | All hand and/or foot operating devices have guards to prevent inadvertent initiation of the press. | 29 CFR 1910.217 (b)(4-5) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-12 | Every power press are equipped with a main disconnect capable of being locked in the off position. | 29 CFR 1910.217 (b)(8) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Machine and Moving Mechanical Parts Checklist

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|----------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| MMP-13 | Machines are inspected periodically and regularly, and records of inspection are maintained. | 29 CFR 1910.217 (e)(1)(i) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-14 | Clutch/break mechanisms, anti-repeat features and single stroke mechanisms are inspected weekly. Records are maintained with dates, tests, maintenance, serial number and signature of inspector. | 29 CFR 1910.217 (e)(1)(ii) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-15 | All belts, pulleys, sprockets and chains, gears, shafts and couplings less than 7 feet from the floor are guarded. | 29 CFR 1910.219 (a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| MMP-16 | All couplings with bolts, nuts or set screws that extend beyond the flange of the coupling are guarded or protected by a sleeve. | 29 CFR 1910.219 (h)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Occupational Medical Surveillance Program Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| OMSEP-01 | Personnel occupationally exposed to noise (exposure exceeds 84 dBA continuous sound pressure level as a time weighted average for 30 or more days per calendar year) are placed on OMSEP. | COMDTINST M5100.47, Chapter 4-D-4.a.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OMSEP-02 | Personnel are placed on OMSEP if their radiation exposure exceeds Coast Guard limits. | COMDTINST M5100.47, Chapter 4-D-4.a.(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OMSEP-03 | Personnel are placed on OMSEP if an industrial hygiene survey determines they are occupationally exposed or if in a designated occupation (see reference). | COMDTINST M5100.47, Chapter 4-D-4.b COMDTINST M6000.1, Chapter 12-A.2.-3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OMSEP-04 | Periodic examinations are conducted annually, within 30 days either side of member's birthday. | COMDTINST M6000.1, Chapter 12- B.3.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OMSEP-05 | BASIC examinations for exposed military personnel are conducted: within 60 days of assignment; every four years, or coincide with biennial / quadrennial exams; and within the year prior to separation or termination of employment if enrolled in the OMSEP. | COMDTINST M6000.1, Chapter 12-B.1.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Occupational Medical Surveillance Program Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|-----------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| OMSEP-06 | Personnel considered occupationally exposed for medical monitoring purposes are enrolled in the OMSEP including the special programs for lead, asbestos, benzene and noise exposures (Hearing Conservation Program). | COMDTINST M6000.1, Chapter 12-A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OMSEP-07 | Personnel are on the OMSEP Program when they meet or exceed 50 percent of Coast Guard exposure standards with or without the use of respirators for 30 or more days a year. | COMDTINST M6000.1, Chapter 12-A.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Ordnance Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| OP-01 | Bimetallic thermometers and temperature cards are present in each magazine and ammunition locker and they are properly mounted. | NSTM 504-7.19 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-02 | ** Adequate ventilation in the work space to purge the atmosphere of cleaning solvent vapors is available. | COMDTINST M8000.2C, Chapter 3 C-8.a.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-03 | "No Smoking" placards are posted in armory and magazine spaces and on ready service and pyrotechnics lockers. | COMDTINST M8000.2B, Chapter 3-C-1 & 5-J-10 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-04 | Safety precautions and operating instructions are posted on or near ordnance equipment. | COMDTINST M8000.2C, Chapter 3.C.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-05 | A "Safety Precautions for Pyrotechnics" placard is posted on pyrotechnics lockers. | COMDTINST M8000.2B, Chapter 3.C.1./ NAVSEA OP 5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-06 | ** Magazine sprinklers are tested and the results recorded per PMS requirements. | COMDTINST M8000.2B, Chapter 5-J-4 and 5-J-5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-07 | Magazine temperatures are taken and recorded as required. | COMDTINST M8000.2C, Chapter 5.J.11 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Ordnance Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| OP-08 | ** Machine gun mounts, carriage, and stands are clearly stamped with the appropriate mount position number. | COMDTINST M8000.2C, Chapter 16-J-1 and 2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-09 | Red danger circles are painted on the deck around gun mounts. | COMDTINST M8000.2C, Chapter 3.B.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-10 | ** Firing stops are adjusted for each machine gun mount. | COMDTINST M8000.2C, Chapter 16-J-1 and 2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-11 | Ready service lockers which are exposed to the sun are equipped with sun shields. | NSTM 700-5.13.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-12 | Ready service lockers are in good repair. | NSTM 700-5.13.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-13 | Grounding straps attached to the pyrotechnics locker are free of corrosion and the contact surfaces are free of paint. | NSTM 700-5.9.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-14 | Pyrotechnics are stored in a cool dry well ventilated space | COMDTINST M8000.2C, Chapter 5.N.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-15 | Alterations to electrical systems in ordnance storage areas are prohibited. | NSTM 700-5.1.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: _____ | OPFAC: _____ | Date: _____ |
| Shop/Area: _____ | Unit POC For This Checklist: _____ | |

Ordnance Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| OP-16 | ** Before each use, ready-service ammunition stowage hooks, latches, pins and straps are examine for damage and deformation. | NSTM 700-5.9.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-17 | ** An "AMMUNITION FAR SIDE" is posted or painted on all bulkheads and decks adjoining or above magazines. | COMDTINST M8000.2B, Chapter 5-J-12 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-18 | Magazines / lockers are free of unauthorized material. | COMDTINST M8000.2B, Chapter 5-9.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-19 | Magazines / lockers are properly identified as to contents. | COMDTINST M8000.2B, Chapter 5-9.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-20 | Magazines have "steam tight" fittings for lights, switches, and electrical connections. | COMDTINST M8000.2B, Chapter 5-J-6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-21 | All Coast Guard firearm mishaps (accidents) are reported with a Mishap Report (MISREP). | COMDTINST M8000.2B, Chapter 2-C-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| OP-22 | ** All personnel who must qualify in weapons firing have first received safety training. | COMDTINST M8000.2C, Chapter 8, part V, paragraph B-1-a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Ordnance Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| OP-23 | ** If medical facilities are not available (30-minute ambulance run) during weapons qualification, an Emergency Medical Technician is assigned to the firing range detail. | COMDTINST M8000.2C, Chapter 8, part V, paragraph H-4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

ORM Checklist (vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| ORM-01 | Biennial Team Coordination Training (TCT) is provided to all cutter personnel assigned to team billets during an underway watch, restricted maneuvering, or special sea detail, as determined by the CO. | COMDTINST 1541.1, Paragraph 6-a or b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-02 | The unit is using the Crew Endurance Management Guide as a mean of identifying and mitigating fatigue and associated risks. | Crew Endurance Management Guide | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03 | ** There are indications that the unit has Incorporated ORM into it's daily operational, maintenance, and support activities. Possible indicators include ORM-03.1 through ORM-03.6 Below: | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03.1 | Use of operational checklists and job aids that include risk assessment tools and/or identify line items that require acknowledgement/use of ORM principles. | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03.2 | Unit requirement to practice risk assessment prior to executing ship-board evolutions. | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03.3 | Unit requirement to practice ORM in daily evolutions as in noted in CO's Standing Orders or other unit instructions. | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

ORM Checklist (vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| ORM-03.4 | Discussion of ORM principles is included as part of check-in process for new personnel | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03.5 | Visual ORM aids (i.e. GAR boards) are posted in key control stations. | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| ORM-03.6 | Use of Risk Assessment Matrix to identify/report readiness shortcoming and associated risks to OPCON prior to deployment. | COMDTINST 3500.3;Paragraph 14.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Personal Protective Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| PPE-01 | ** The unit has conducted a hazard assessment and implemented appropriate PPE requirements. | 29 CFR 1910.132 (c)(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-02 | ** There is sufficient personal protective equipment (PPE) provided and appropriate for the tasks assigned. | 29 CFR 1910.132 (a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-03 | The command assures that PPE furnished by the member is adequate and maintained properly. | 29 CFR 1910.132 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-04 | ** PPE is used and maintained in a reliable and sanitary condition. | 29 CFR 1910.132 (a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-05 | Compressed air is regulated to 30 psi or below when used for cleaning purposes. | 29 CFR 1910.242 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-06 | Effective chip guarding and PPE is provided to protect personnel from flying chips (e.g. protective barriers, shields, safety goggles, face shield). | 29 CFR 1910.242 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Personal Protective Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| PPE-07 | ** Install eyewash stations (with 15 minutes of continuous flow) that require no more than 10 seconds to reach and shall be on the same level as the hazard such as corrosive material (e.g. lye, battery acid). Path of travel shall be free of obstructions. | 29 CFR 1910.151 (c) / ANSI Z358.1, Articles 5.1.5 and 5.4.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-08 | Foot protection is provided in areas where there is a danger of a foot injury or the feet are exposed to electrical hazards. | 29 CFR 1910.136 (a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-09 | Foot protection meets the requirements of ANSI Z41.1-91. | 29 CFR 1910.136 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-10 | Safety hard hats are provided and worn when there is a possible danger of head injury from impact, flying or falling objects, or electrical shock or burns. | 29 CFR 1910.132 (a)(1) and (a)(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-11 | Safety hard hats meet the requirements of ANSI Z98.1-1986. | 29 CFR 1910.135 (b) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-12 | Protective eye and face equipment is required and used to protect personnel from workplace hazards. | 29 CFR 1910.133 (a)(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Personal Protective Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| PPE-13 | Protective eye and face equipment is maintained in a sanitary and reliable condition. | 29 CFR 1910.132 (a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-14 | Eye and face protection meets ANSI Z87.1-1989 standards. | 29 CFR 1910.133 (b)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-15 | ** Personnel are provided documented training in the selection and use of PPE prior to conducting tasks requiring it's use. | 29 CFR 1910.132(f)(1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-16 | All eyewash units shall be inspected and maintained in accordance with manufacturer's instructions. Plumbed equipment shall be activated weekly to verify proper operation. | ANSI Z358.1, Article 5.5.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-17 | Eyewash stations are maintained and caps are in place over nozzles. | ANSI Z358.1, Article 5.1.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PPE-18 | Chemical protective gloves are compatible with the chemicals they are intended to protect against. | Material Safety Data Sheets (MSDS) 29 CFR 1910.132 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Potable Water Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|-------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| PW-01 | Potable water deck risers and hose connections are clearly marked "POTABLE WATER ONLY". | COMDTINST M6240.5, Chapter 1-C.11.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-02 | ** Approved potable water hoses are used to take on water. Hoses are labeled / stenciled "Potable Water Only" at 10 foot intervals. | COMDTINST M6240.5, Chapter 1-C.11.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-03 | Potable water hoses are stowed with the ends coupled or plugged with screw in/on caps. | COMDTINST M6240.5, Chapter 1-C.12.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-04 | ** The operation of shipboard distilling plants is in accordance with NSTM, Chapters 531 and 220 | NSTM, Chapter 531 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-05 | ** Water supplies of doubtful quality are examined by the medical officer (or other responsible person) before water is taken on. | COMDTINST M6240.5, Chapter 1-B.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-06 | Potable water hose connections are at least 18" above the deck surface and constructed to prevent contamination. | COMDTINST M6240.5, Chapter 1-C.7.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Potable Water Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| PW-07 | Instructions and precautions relative to taking on potable water and the procedures for storage and disinfection of potable water hoses are posted in the hose lockers. | COMDTINST M6240.5, Chapter 1-C.12.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-08 | ** Air gaps are provided where equipment is connected to the potable water system. The length of the air gap is at least 2 times the diameter of the potable water pipe. | COMDTINST M6240.5, Chapter 1-H.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-09 | ** Potable water tanks are tested at least daily for free available chlorine or total bromine residuals. | COMDTINST M5100.47, Chapter 6-E-3.b (3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-10 | ** A minimum of 4 samples from the vessel's potable water system are collected and tested for bacteriological quality monthly (1 sample per week is recommended). | COMDTINST M5100.47, Chapter 6-E-3.c.(2)(C) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-11 | ** Backflow preventers are installed where hoses (e.g., hoses on deep sinks) are connected to the ship's potable water system. | COMDTINST M6240.4, Chapter 6-C.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-12 | A fresh water hose with a quick opening valve is located in the vicinity of each brominator. | NSTM 533-3.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Potable Water Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|----------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| PW-13 | Warning placards are installed at brominators and at bromine cartridge stowage lockers. | NSTM 533-3.4.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-14 | ** A measurable residual of at least 0.2 ppm (parts per million) free available chlorine (or bromine) with a pH of 6.8-7.8 is maintained in all parts of the potable water distribution system after a 30 minute contact time. | COMDTINST M6240.5, Chapter 1-D.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-15 | ** Water received from an unapproved source, a source of doubtful quality, or an area where amebiasis or infectious hepatitis is endemic, is chlorinated or brominated to provide at least 2.0 ppm halogen residual in the tanks after 30 minutes. | COMDTINST M6240.5, Chapter 1-D.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-16 | A log is maintained of all potable water tests (pH, chlorine/bromine, and bacteriological). | COMDTINST M6240.5, Chapter 1-J.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-17 | ** Calcium hypochlorite is properly stored, not subject to spillage, moist or wet environments, or stored with oxidizable material. Storage in machinery, berthing spaces, flammable liquid storage areas, or oil and water testing labs is prohibited. | COMDTINST M6240.5, Chapter 1-D.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Potable Water Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|---------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| PW-18 | ** Calcium hypochlorite procurement is limited to 6 ounce bottles. All ready stock is stored in a locked locker with a minimum of 3- (1/4 inch) holes drilled in the bottom for ventilation. | COMDTINST M6240.5, Chapter 1-D.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-19 | All hose connections, valve handles/levers, sounding tube covers, and steel sounding tape handles for potable water are color coded dark blue. | COMDTINST M6240.5, Chapter 1-C.7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-20 | Potable water sounding tubes are equipped with valves or caps which can be padlocked closed when not in use. | NAVMED P-5010, Chapter 6-8.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-21 | Piping systems are labeled with content and direction of flow, where feasible. | COMDTINST M10360.3B, Chapter 11.C.4.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PW-22 | Potable water hoses are properly label, store, and protected. They are protected from sources of contamination at all times. Routine examinations are conducted and potable water hoses are remove from use if cracks develop in the lining or leaks occur. | COMDTINST M6240.5 1.B.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Power Tools Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| PT-01 | Grinding wheels are free from foreign matter deposits and are in good condition. | 29 CFR 1910.215 (d)(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-02 | ** Portable power tools are equipped with proper guards. | 29 CFR 1910.243 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-03 | Tool rests on bench grinders are adjusted to no more than 1/8" away from wheel and tongue guards are adjusted to no more than 1/4" from wheel. | COMDTINST M 5000.7, Chapter 3-33-1 29 CFR 1910.215 (a)(4) and (b)(9) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-04 | ** Tool guards are properly adjusted and are in good working order. | COMDTINST M 5000.7, Chapter 3-33-1-A 29 CFR 1910.243 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-05 | Safety instruction signs are posted in a conspicuous locations where power tools are used or stored. | COMDTINST M10360.3B, Chapter 15-B 29 CFR 1910.145 (c)(3) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-06 | ** Portable power tools are maintained in a safe condition (e.g., cutting blades are sharp, in good condition, cords maintained). | COMDTINST M 5000.7, Chapter 3-33-1 29 CFR 1910.242(a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-07 | Electrical tools are inspected, tested, and tagged by an electrician in accordance with scheduled PMS requirements. | COMDTINST M9000.6D, Chapter 077, F.3 & 4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Power Tools Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| PT-08 | ** Appropriate personnel protective equipment is available and personnel are trained and use at the required work stations. | COMDTINST M5000.7, Chapter 3-26-1 D | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-09 | ** Training is provided for all who use portable power tools. Personnel must demonstrate knowledge of tool operation and safety precautions prior to use. | COMDTINST M5000.7, Chapter 3-33-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| PT-10 | ** Replace air hose and/or fittings with materials designed for the operating pressure and service intended (i.e., barbed fittings with crimped type clamps). | NSTM, chapter 631-2.8.5 29 CFR 1910.243 (b)(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Radiation Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| RS-01 | Affected personnel are familiar with proper handling and storage procedures for cathode ray tubes and other electron tubes. | COMDTINST M10550.25A, Chapter 4.1.6.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-02 | All personnel are trained on the permissible exposure limit (PEL) for electromagnetic radiation hazards and are made aware of PEL boundaries. | COMDTINST M10550.25A, Chapter 4.1.10.5 and Chapter 4.1.10.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-03 | ** High voltage signs are posted near antennas, radar, and electrical equipment. | COMDTINST M10550.25A, Chapter 4.1.2.14 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-04 | ** Permissible Exposure Limit (PEL) boundaries are clearly identified for all electromagnetic radiating antennas and other electromagnetic radiation hazards. | COMDTINST M10550.25A, Chapter 4.1.10.5 and Chapter 4.1.10.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-05 | ** Personnel who routinely work directly with equipment that emits RF radiation follow the occupational/controlled MPE limits. | COMDTINST M10550.25A, Chapter 4.1.10.7.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-06 | ** RF radiation warning signs are posted near radio transmitting equipment. | COMDTINST M10550.25A, Chapter 4.1.10.8.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Radiation Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| RS-07 | ** Safety precautions are being adhered to by personnel to guard against RF induced voltage, to prevent shock to personnel, actuation of electrically operated devices, and ignition of flammable materials or vapors. | COMDTINST M10550.25A, Chapter 4.1.10.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-08 | Personnel are aware of PEL boundaries, radiation hazard exposure prevention and unit training. | COMDTINST M10550.25A, Chapter 4.1.10.5 and Chapter 4.1.10.6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RS-09 | ** Personnel follow proper handling procedures for cathode ray tubes and other electron tubes. | COMDTINST M10550.25A, Chapter 4.1.6.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Rescue and Survival Systems Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|---|--|
| | ** Indicates a Significant Program Indicator | | |
| RSE-01 | ** The Commanding Officer has promulgated a unit policy concerning the use and maintenance of survival equipment. This shall include a written designation of a Survival Petty Officer. | COMDTINST M5000.3B, Chapter 4-2-16 COMDTINST M10470.10E, Chapter 1.D.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-02 | ** The surface unit has an adequate allowance of survival equipment (e.g., life jackets, survival suits, flotation coveralls, ring buoys, float lights) on board. Equipment allowances meet or exceed the minimum requirements of COMDTINST M10470.10 | COMDTINST M10470.10E, Chapter 1.E.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-03 | ** The surface unit conducts and documents inspections of all survival and rescue equipment when required utilizing appropriate maintenance procedure cards and logs. | COMDTINST M10470.10E, Chapter 1.D | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-04 | ** Life rafts are inspected annually and results are recorded in the Cutter Engineering Report or on the Boat Inspection Report. | COMDTINST M9000.6D, Chapter 583, A COMDTINST M10470.10E, Chapter 5.B.1.h | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-05 | The operation painter line (sea painter) is properly attached to the life raft's stowage rack | COMDTINST M10470.10E, Chapter 5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Rescue and Survival Systems Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|---|--|--|
| | ** Indicates a Significant Program Indicator | | |
| RSE-06 | ** Hydrostatic releases, if installed on life rafts, are inspected and documented in accordance with the Navigation and vessel Inspection Circular (NVIC) 4-86). | COMDTINST 10470.10E, Chapter 5.D and NVIC 4 86 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-07 | The floating electric marker lights are inspected per MPC 2-7. | COMDTINST M10470.10E, Chapter 2.A.5.c | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-08 | The lanyards on the floating electric marker lights are in good condition, 3 feet in length, and polypropylene line using an eye splice. NSN 4020-00-968-1350 | COMDTINST M10470.10E, Chapter 2.A.5 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-09 | ** Ring buoys are in good condition and are maintained IAW MPC 2-6. | COMDTINST M10470.10E, Chapter 2.A.4 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-10 | ** Hydrostatic release devices are properly tensioned. Illustrations of proper tensioning requirements are outlined in Navigation and Vessel Inspection Circular (NVIC) 4-86. | COMDTINST M9000.6D, Chapter 583, A.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-11 | Life raft gripes are made of plastic covered CRES cable or nylon covered stainless steel straps and installed in accordance with CG Dwg. FL-8201-86. | COMDTINST M9000.6D, Chapter 583, A.3, CG Dwg. FL-8201-86 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Rescue and Survival Systems Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| RSE-12 | ** The manual release button on the hydrostatic release is installed in such a manner that it can be manually activated in a time of emergency. | COMDTINST M9000.6D, Chapter 583, A.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-13 | ** Hydrostatic release devices are free of paint, salt, dirt buildup, and corrosion. | NSTM 583-13.10.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-14 | ** The EEBD stowage bags are modified with a 4" strip of nonskid adhesive material on each side to facilitate easy opening with wet or burned hands (if manufactured before 1 Nov 95). | Damage Control Technical Publication 2006B MPC# R-M-1617 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-15 | The humidity indicator on EEBD is blue vice pink or clear. | NSTM 077-3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-16 | ** EEBDs are within the expected shelf life of 16 years. | NSTM 077-3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-17 | ** EEBDs are provided in accordance with ShipAlts (e.g., main engineering spaces, crews berthing spaces, manned high risk spaces below the damage control deck). | COMDTINST M9000.6D, Chapter 555, G.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Rescue and Survival Systems Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| RSE-18 | ** EEBDs are mounted using the appropriate approved mounting device in accordance with Tech Pub 2771. | COMDTINST M9000.6D, Chapter 555, G.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-19 | Photoluminescent marking is installed on EEBD storage box | COMDTINST M10360.3B, Chapter 9-F.3.f | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-20 | EPRIBS are maintained IAW MPC 7-1. Replace hydrostatic releases on EPIRBS which are within 30 days of their expiration date. | COMDTINST M10470.10E, Chapter 7-A-1(e) & MPC 7-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-21 | The EPIRB is registered to the vessel with a copy of the conformation, copy of actual registration, and a new proof of registration decal. | COMDTINST M16130.2C, APPENDIX J | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RSE-22 | Hydrostatic releases on EPIRBS are within their expiration date. | COMDTINST M10470.1C, Chapter 3-D-6 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Respiratory Protection Program Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
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| | ** Indicates a Significant Program Indicator | | |
| RP-01 | ** The Cutter has a written respiratory protection program governing the selection, use, and maintenance of respiratory equipment. | COMDTINST M6260.2C, Chapter 1-A-3 and Chapter A-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-02 | ** Respirator users are fit tested annually by a qualified individual. | COMDTINST M6260.2C, Chapter 1-A-3.c and Chapter 6-B-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-03 | Personnel are evaluated by the medical department before they are assigned tasks requiring the use of respirators. | COMDTINST M6260.2C, Chapter 1-A-3.f | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-04 | Personnel receive annual training on the hazards associated with various tasks requiring respiratory protection and the proper use and care of respiratory protective equipment. | COMDTINST M6260.2C, Chapter 1-A-3.d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-05 | Air is tested at appropriate intervals, depending on compressor type and alarms present, to ensure it meets grade D air quality requirements. | COMDTINST M6260.2C, Enclosure (1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-06 | ** Entry into IDLH atmospheres (e.g., fuel tanks) is prohibited, except in emergency situations, and then only when each entry is approved by the Commanding Officer. | COMDTINST M6260.2C, Chapter 4-D-1.a NSTM 074-19.4.a and 074-19.14 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Respiratory Protection Program Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| RP-07 | Supplied-air respirators in use are positive-pressure types. | COMDTINST M6260.2C, Chapter 4-D-2.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-08 | Respirators are inspected, cleaned, disinfected, and stored properly. | COMDTINST M6260.2C, Chapter 8 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-09 | The use of ship service air as a source of breathing air is prohibited. | COMDTINST M6260.2C, Enclosure (1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-10 | ** The breathing air compressor is constructed and situated to provide an intake of outside air and to avoid entry of contaminated air into the system. | COMDTINST M6260.2C, Enclosure (1) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-11 | Purchase and maintain a sufficient number of respirator models and sizes to allow users to select acceptable and correctly fitting respirators. | 29 CFR 1910.134, Appendix A, Paragraph A-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| RP-12 | Before assigning personnel to work tasks wear a respirator is required, provide initial respiratory protection training to personnel who have not previously received this training. | COMDTINST 6260.2C, Chapter 7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Respiratory Protection Program Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|-----------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| RP-13 | Have a qualified person, such as an Industrial Hygienist, evaluate the workspace/job/task for possible work related exposures that may require the use of a respirator. | COMDTINST M6260.2C, Chapter 5-B-2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Weight Handling Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---|--|
| | ** Indicates a Significant Program Indicator | | |
| WH-01 | ** Replenishment at sea fittings and equipment are inspected prior to each UNREP evolution, but not less than annually. | COMDTINST M9000.6D, Chapter 571.B.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-02 | ** The anchor is lowered until two shots of chain remain on board at least semi-annually and visually inspected. | COMDTINST M9000.6D, Chapter 581.B.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-03 | ** Booms are tested IAW Table 573-1 of the NEM, MLC or PMS and the date and level of the last boom test is stenciled near the label plate in a location where it is clearly legible. | COMDTINST M9000.6D, Chapter 573.A.2.a & A.4.d.(2) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-04 | ** Engraved label plates shall be installed on cutter and boat booms and frames to document the Working Load Limit, test weights, and date of certification of the load and corresponding parts of the purchase. | COMDTINST M9000.6D, Chapter 573.A.4.b | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-05 | ** Load tests shall be conducted annually, or after any modifications of hoisting fittings, slings, cranes, booms, or davits and falls that form a part of the boat handling gear. | COMDTINST M9000.6D, Chapter 583.B.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-06 | The helicopter deck tie-down fittings have been given a certified pull test. The records are recorded in the hull history log. | COMDTINST M9000.6D, Chapter 588.A | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Weight Handling Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|---------------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| WH-07 | ** Slings are taken out of service when signs of deterioration are noted. | COMDTINST M9000.6D, Chapter 583 B.4.a | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-08 | ** Slings are designed for a specific boat and only used to lift that type boat. | NSTM 583-7.5.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-09 | The eye of the swivel and the anchor bending shackle face away from the anchor. | NSTM 581-6.2.7 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-10 | ** The wire rope sling has a copper or stainless band indicating the type of boat it was manufactured to lift. | NSTM 583-7.5.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-11 | Slings used to lift boats not furnished with a sling (RHI) have a built in safety factor of 6. | NSTM 583-7.1.1.1.(a) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-12 | ** All RHI lifting slings are visually inspected at least monthly or before each lift. | NSTM 583-7.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-13 | The crane weight test(s) is entered in CM Plus, or hull history, if cutter does not have CM Plus | COMDTINST M9000.6D Chapter 573-A-4.d. | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Weight Handling Equipment Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|----------------------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| WH-14 | Padeyes, chocks, cleats and bitts are visually inspected annually. Deck and bolted Padeyes are examined by non-destructive methods at intervals not to exceed 2 years. | COMDINST M9000.6D, Chapter 573 C | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-15 | Elevator and dumbwaiters are equipped with functioning interlocks. Doors must remain shut unless the elevator is in a safe position (at desired location). | NSTM Chapter 772, Table 772-C-1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| WH-16 | Annual inspections and testing of chain falls, hand operated chain hoists (come-alongs) and related equipment are conducted and documented by qualified personnel. | NSTM Chapter 572-3.2.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Welding Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|------------------|--|--|--|
| | ** Indicates a Significant Program Indicator | | |
| W-01 | All welding equipment is clear of passageways, ladders, etc. | ANSI Z49.1-88 4.1.1 & NSTM 074-10.1 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-02 | Local or general ventilation is provided which is capable of removing harmful fumes, vapors, toxic dusts, etc. | COMDTINST M6260.2, Chapter 2.B.1.b.& d | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-03 | ** Electric arc power cables are free of defects. | NSTM 074-10.7.3.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-04 | Power plug connections to arc welding machines have insulating boots or recessed terminal connections. | NSTM 074-10.7.3.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-05 | ** Flammable / combustible materials are stored away from hot work areas. | NSTM 074-10.8.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-06 | ** Eye protection is appropriate for the operation worn by both operator and helper(s). | NSTM 074-10.9.2.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| W-07 | ** Personnel in the area of arc welding wear appropriate eye protection or are protected by screens. | NSTM 074-10.9.2.2 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

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| Unit Name: | OPFAC: | Date: |
| Shop/Area: | Unit POC For This Checklist: | |

Welding Safety Checklist (Vessel)

| Checklist Number | Checklist Item | Reference | Yes No N/A |
|-------------------------|---|-------------------|--|
| | ** Indicates a Significant Program Indicator | | |
| W-08 | ** Personnel wear appropriate personal protective equipment against heat and electricity hazards. | NSTM 074-10.9.2.3 | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |