**Checklist of E/OHS Activities for Compressed Gas Safety**

Program Contact Person(s) Brian Parrie

Department Contacts:

Shop Brian Parrie

On Site. Brian Parrie

Is the Compressed Gas Plan in place? *Yes No N/A*

Is the Plan current?  *Yes No N/A*

Has the Plan been reviewed this school year? *Yes No N/A*

Has the facility been surveyed for compressed gas inventories? *Yes No N/A*

Has training been conducted for affected personnel? *Yes No N/A*

 Date:

Are records established/maintained to monitor gas inventory? *Yes No N/A*

COMPRESSED GAS FIELD REVIEW

*Compressed Gas Inventory*

|  |  |
| --- | --- |
| *Date: 1/09/2019* | *Program Contact Person: Shane Carlson* |
| *Department: Metals Shop* | *Department Responsible Person:* Elizabeth Johnson |
| *Location: Metals Shop Room* |  |
| *Cylinders:** *O2 \_\_\_(5)\_\_\_\_\_\_\_\_\_*
* *Acetyl \_\_\_\_\_(4)\_\_\_\_\_\_\_*
* *NH4 \_\_\_\_\_\_\_\_\_\_\_\_*
 | * *CO2 \_\_\_\_\_\_\_\_*
* *Argon \_\_\_\_\_(3)\_\_\_\_\_\_\_*
* *Argon/CO2\_\_(4)\_\_\_\_\_\_\_\_\_\_*
* *Other( helium) \_\_\_\_\_\_\_\_\_\_\_\_*
 |
| *Date: 1/09/2019* | *Program Contact Person : Brian Parrie* |
| *Department: Chemistry Lab* | *Department Responsible Person: Amy Ruben*  |
| *Location: Chemistry Lab storage* |  |
| *Cylinders:** *O2 \_\_\_\_\_\_\_\_\_\_\_\_*
* *Acetyl \_\_\_\_\_\_\_\_\_\_\_\_*
* *NH4 \_\_\_\_\_\_\_\_\_\_\_\_*
 | * *CO2 \_\_(1)\_\_\_\_\_\_*
* *Argon \_\_\_\_\_\_\_\_\_\_\_\_*
* *Argon/CO2\_\_\_\_\_\_\_\_\_\_\_\_*
* *Other( helium) \_\_\_\_\_\_\_\_\_\_\_\_*
 |

*Compliance Check List*

 **No Yes**

|  |  |  |
| --- | --- | --- |
| *1. Are cylinders in well-ventilated area?* |  | X |
| *2. Are cylinders stored separate from flammable by at least 20 feet?* |  | X |
| 1. *During storage are oxygen cylinders separated from fuel gas cylinders, unless on welding cart?*
 |  | X |
| *4. Are cylinders kept away from sources of heat (below 130 F)?* |  | X |
| 1. *Are safety chains used at all times on both full and empty*

*cylinders? (2/3rds from top of cylinder)* |  | X |
| *6. Are empty cylinders maintained separate from full cylinders?* |  | X |
| 1. *Are cylinders kept away from sources of ignition such as electricity,*

*excessive heat or oily rags?* |  | X |
| *8. Are carts designed specifically for gas cylinders available?*  |  | X |
| *9. Are damaged cylinders, valves/hoses removed from service?* |  | X |
| *10. Are all cylinders properly labeled with the contents?* |  | X |
|  |  |  |

|  |  |
| --- | --- |
| Training: Elizabeth JohnsonSignature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Trainer: Shane CarlsonDate: 1/09/2019 |