Lockout/Tagout Program
Periodic Evaluation Form

1. Complete all of the following questions.
2. Explain any unsatisfactory evaluation (a “No” answer) and provide a corrective action for it in the Action Plan at the end of the form.
3. Evaluation is to be completed by an authorized employee who is not directly involved in the lockout activity.

Date: ____________________________ Evaluator: ____________________________

Description of activity being evaluated: _______________________________________

__________________________________________________________

EVALUATION QUESTIONS:

1. Are all energy isolating devices associated with the equipment or machinery being evaluated locked in the off position or otherwise secured from movement?
   - Yes □ No □

2. Is lockout performed with the required locks and tags?
   - Yes □ No □

3. Does the tag identify the employee who is performing the maintenance, and is it attached to the lock properly?
   - Yes □ No □

4. Are employee(s) involved in maintenance activity using individual locks in the appropriate areas?
   - Yes □ No □

5. Can authorized employees explain the proper procedures (notify affected employees/stop machinery/control energy/attach isolating devices/release stored energy/verify control) for locking out equipment?
   - Yes □ No □

6. Can authorized employees explain the procedures (notify affected employees/check area around machine/remove isolating devices/restore energy/verify proper operation) for restoring equipment to normal operation?
   - Yes □ No □

7. Are authorized employees aware of the type, magnitude, and hazards of energy sources?
   - Yes □ No □

8. Are all affected employees notified of the work being performed, and do they understand they are not to attempt the start-up of machinery?
   - Yes □ No □

9. Can affected employees describe the general purpose of the company lockout program?
   - Yes □ No □

10. If required, was the machine-specific lockout description for this piece of machinery accurate and up-to-date?
    - Yes □ No □
1. Once the evaluation of this particular lockout activity has been made, the following program evaluations need to be performed:

A. Review all machine-specific lockout descriptions. Have any modifications been made to the electrical, hydraulic, or pneumatic systems, the blocking devices, piping, equipment, etc. that would require changes to be made to the machine-specific lockout description?

Yes  No

B. Evaluate changes to work areas since the last periodic evaluation. Has any new machinery or equipment been purchased or installed that needs to have a “machine-specific lockout description” developed?

Yes  No

Action Plan for All Unsatisfactory Items in the Periodic Evaluation Form

<table>
<thead>
<tr>
<th>EXPOSURE</th>
<th>CORRECTIVE ACTION NEEDED</th>
<th>RESPONSIBLE PERSON AND TARGET DATE</th>
<th>STATUS</th>
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