**Weekly Chain and Strap Inspection**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Inspection Date: | | Inspected by: | | Location: | |
| Were any chains or straps removed from the plant?  Yes  No  N/A | | | | | |
| **Work Area** | **Description** | | **Destroyed?** | | **Replacement Made/Ordered?** |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |
|  |  | | Yes  No | | Yes  No |