

# BelaySAFE Formal Inspection Log

Equipment ID: \_\_\_\_\_  
 Date of Inspection: \_\_\_\_\_  
 Inspector's Name: \_\_\_\_\_

## Visual Inspection

General Observations: \_\_\_\_\_  
 \_\_\_\_\_

Mounting Eye: \_\_\_\_\_ mm (16mm minimum acceptable size)  
 Rope Guides: \_\_\_\_\_ mm (14.5mm minimum acceptable size)

## Mechanical Functionality

Upper Pulley: Spin Direction \_\_\_\_\_ (Clockwise or Counter-Clockwise)  
 Lower Pulley: Spin Direction \_\_\_\_\_ (Clockwise or Counter-Clockwise)  
 Calibration Pulley: Removed and Greased (Yes/No)

## Safety and Compliance

Labels: Legible (Yes/No)  
 Modifications or Repairs made (Yes/No)

## Findings and Action Taken

Mounting Eye: \_\_\_\_\_ mm (Marked NC/OK, Quarantined or Released for use)  
 Rope Guides: \_\_\_\_\_ mm (Marked NC/OK, Quarantined or Released for use)  
 Upper Pulley: Spin Direction (Marked NC/OK, Quarantined or Released for use)  
 Lower Pulley: Spin Direction (Marked NC/OK, Quarantined or Released for use)  
 Calibration Pulley: Removed and Greased (Marked NC/OK)  
 Labels: Legible (Marked NC/OK, Quarantined or Released for use)  
 Modifications or Repairs made (Marked NC/OK, Quarantined or Released for use)  
 If Yes, Operator showed documentation that the modification or repair has been authorized by the manufacturer (Yes/No)

## Additional Comments

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**I hereby certify that to the best of my knowledge, all information contained in this log is accurate and complete. I further certify that any BelaySAFE device found to be unfit for service has been immediately removed from use, properly marked with "DO NOT USE" and securely quarantined.**

\_\_\_\_\_  
 Inspector's Signature