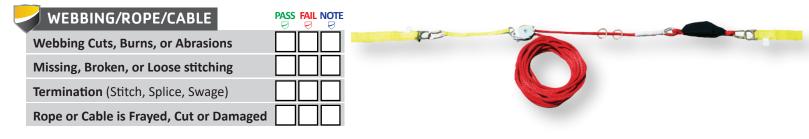
INSPECTION FORM Horizontal Lifelines

FALL SAFETY

877.228.9327 frenchcreekproduction.com

Inspection Date:	Owner/Company:
Manufacturer:	Inspector Name:
Date of Manufacture:	Signature:
Model #:	_ Date Issued:
Serial #:	_ Community Product: YES NO
LABELS & MARKINGS	
Appropriate ANSI/OSHA Markings	
	Digitize 0 0 0 000000000000000000000000000000

	PASS FAIL NOTE
Corrosion or Rust Present	
Deformation (Pitting or Nicks)	
Snaphook Gates (Self Locking/Closing)	
Tensioner	



SHOCK ABSORBER	PASS FAIL NOTE			
Energy Absorber (Impacted or Deployed)				
Damage (Pitting, Nicks, Corrosion)		NOTES:		
Damage / Fraying / Broken Stitching				
SUMMARY:				
[Acceptable	Unacceptable		
		Reason:		

DISPOSITION:	Returning to service Destroyed (Date)	
	Other	Next Inspection Date: