Form Number LLCF-075	Issue Date 03/17/16	Revision Date 01/01/24	Form Number		
	Rope Access Station	LLCF-075			

Inspector:					Date:		Equ	ipment I.D.			
Manufacturer	:				Model:			Serial #:			
Date of Manu	facture:										
Inspection Pu	rpose:	Qua	rterly 🗆	Initial Insp	pection	Post-Repair □	Quality .	Assurance □	] Po	ost-Incident	
Obvious Visu	al Defec	ts N	oted:								
									N/A	PASS	FAIL
Check for cuts, frays, or abrasion areas.											
Check for chemical or thermal damage.											
Check for cor	npressio	n daı	mage							•	•
Check for interior core damage.											
All labels must be present and fully legible.											
				OVERAL	L INSPE	CTION ACCE	TANCE	CRITERIA			
This equipment has been inspected and found to be in good working conditions.											
If the inspecti Immediately.				or defective on service da		Tag <b>DO NOT U</b>	SE and re	emove from s	service		
Comments:											
				STATIC	ROPE W	ORK HISTOR	Y AND EX	XPOSURE			
Date				,	Work Per	formed			HEAT	EDGES	TENSION
			ı								
White (1st Qtr.) $\Box$		Green	$(2^{\mathrm{nd}}  \mathrm{Qtr.})  \Box$	$\square$ Red (3 <sup>rd</sup> Qtr.) $\square$			Blue (4 <sup>th</sup> Qtr.) □				
Signature:								Date:			