

Manufacturing Questionnaire

Named Insured _____

1. Does machinery have point of operation guarding? Yes No
2. Are lockout / tagout procedures in place? Yes No
3. Do machines have proper ventilation / dust collection system? Yes No
4. Are employees required to wear personal protective equipment:
 - a. Safety Glasses Yes No
 - b. Hard Hats Yes No
 - c. Steel toed shoes Yes No
 - d. Hearing protection Yes No
 - e. Gloves Yes No
5. Do you have regular safety meetings with your employees? Yes No
6. Do you have Informal tool box safety talks? Yes No
7. Do you employ any casual or day labor? Yes No
8. Does the insured offer delivery of goods? Yes No