

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
001	White Board	None													
002	Heat pump	None													
003	Stereo	None													
004	Conference phone	None													
005	Projector	None													
006	Board room table	None													
007	6 x Chairs	None													
008	Small Cabinet	None													
009	Two seater couch	None													
010	Reception counter desk	None													
011	Reception computer	None													
012	Reception phone	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
013	Reception chair	None													
014	Small grey set of drawers	None													
015	Two seater couch	None													
016	3 x Two door cabinets	None													
017	Round table	None													
018	Office phone	None													
019	Photo Copier	None													
020	Health and safety notice board	Monthly	Done				Shaun Sutherland								
021	Shredder	None													
022	Desk	None													
023	Two door low cabinet	None													
024	Two door high cabinet	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
025	Cell phone booster	None													
026	Chair fixed	None													
027	Swivel chair	None													
028	MD's phone	None													
029	MD's computer and docking station	None													
030	Set of three drawers	None													
031	Heat pump	None													
032	Steel Shelving	None													
033	Wooden shelves	None													
034	Wooden cabinet	None													
035	Grey work desk	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
036	Heat pump	None													
037	Steel cubby holes	None													
038	Binding machine	None													
039	Wooden cabinet	None													
040	Sales desk	None													
041	Chair fixed	None													
042	Swivel chair	None													
043	Sales phone	None													
044	Sales computer and docking station	None													
045	Heat pump	None													
046	Shelving	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
047	Three drawer filing cabinet blue	None													
048	Two drawer filing cabinet grey	None													
049	Two door filing cabinet grey	None													
050	Key box	None													
051	Fridge	None													
052	Dishwasher	None													
053	kettle	None													
054	Hot water heater	None													
055	Water filter	Annually in September													Shaun Sutherland
056	Microwave	None													
057	Half round cabinet	None													
058	2 x Fire Extinguishers	Annually in October													

# Plant and Equipment Inspection Schedule

YEAR 2016

Business name	Maxicom (2013) Limited	Date inspected	31/08/16
Workplace/site address	20 Herekino Street Whangarei	Inspected by	Shaun Sutherland
Work Area or Group	All areas	Signature	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
059	Hand dryer	None													
060	Patch panel cabinet	None													
061	Northpower ONT unit	None													
062	CCTV NVR unit	None													
063	8 port switch	None													
064	2 x AT switches	None													
065	Siemens gigaset cordless base unit	None													
066	Draytek DV2860 router	None													
067	UPS	None													
068	Workbench table	None													
069	Engineers stand up desk (Bradley)	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
070	Engineers desk (Casper)	None													
071	Engineers desk (Jon)	None													
072	Service managers desk	None													
073	2 x Long grey work benches	None													
074	Dark Brown cabinet	None													
075	Two door cabinet	None													
076	Service managers phone	None													
077	Brother fax machine	None													
078	Service managers computer	None													
079	Samsung LCD television	None													
080	Workshop HP computer 1	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
081	Workshop HP computer 2	None													
082	NUC – office spare	None													
083	Generator	Monthly													Cherie Fisher
084	4 x grey three drawer cabinets small	None													
085	Engineers phone (Spare engineer)	None													
086	Engineers phone (Casper)	None													
087	Engineers phone (Jon)	None													
088	Engineers phone (Mike)	None													
089	Workshop ladder	Before each use													The user
090	Engineers laptop (Spare Engineer)	None													
091	Engineers computer (Casper)	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
092	Engineers laptop (Casper)	None													
093	Engineers laptop and docking station (Jon 1)	None													
094	Engineers laptop (Jon 2)	None													
095	Engineers laptop (Mike 1)	None													
096	Engineers laptop (Mike 2)	None													
097	Quickbooks computer	None													
098	Net Gong computer	None													
099	UPS for QB and netgong computer	None													
100	Screen and keyboard switch	None													
101	DV2710n test network router	None													
102	Network NAS	None													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
103	5 x Swivel seats	None													
104	Grey seating ball (Jon)	None													
105	Alarm control box	None													
106	Heat pump	None													
107	Stepladder 1.8m	Before each use													The user
108	Soldering iron 15W 240V	Before each use													The user
109	Cordless drill Bosch with 240V charger	Before each use													The user
110	Hammer drill 240V	Before each use													The user
111	30m extension lead	Before each use													The user
112	Halogen Floodlight 150W 240V	Before each use													The user
113	6 Way power board	Before each use													The user

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
114	Hub Netgear 240V	None													
115	Tool box with various hand tools	None													
116	Hard hat	Before each use													The user
117	Hi Viz jacket	Before each use													The user
118	Ear muffs	Before each use													The user
119	First Aid kit	3 Monthly in March, June,Sept,Dec			Done			Done							Alsco inspector
120	Fire extinguisher	Annually in October													
121	2m stepladder	Before each use													The user
122	1m stepladder	Before each use													The user
123	Electric drill 240V	Before each use													
124	Cordless drill and charger 240V	Before each use													

# Plant and Equipment Inspection Schedule

YEAR 2016

Business name	Maxicom (2013) Limited	Date inspected	31/08/16
Workplace/site address	20 Herekino Street Whangarei	Inspected by	Shaun Sutherland
Work Area or Group	All areas	Signature	Shaun Sutherland

Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
125	Toll kit with various hand tools	None													
126	Gas powered soldering iron	Before each use													The user
127	20m extension lead	Before each use													The user
128	Multi meter	Before each use													The user
129	Label machine	Before each use													The user
130	Torch	Before each use													
131	Hi Viz vest	Before each use													
132	Hard hat	Before each use													
133	Ear muffs	Before each use													
134	First aid kit	3 Monthly in March, June, Sept, Dec			Done			Done							Alsco inspector
135	Fire extinguisher	Annually in October													

# Plant and Equipment Inspection Schedule

YEAR 2016

<b>Business name</b>	Maxicom (2013) Limited	<b>Date inspected</b>	31/08/16
<b>Workplace/site address</b>	20 Herekino Street Whangarei	<b>Inspected by</b>	Shaun Sutherland
<b>Work Area or Group</b>	All areas	<b>Signature</b>	Shaun Sutherland

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
136	Urlich step ladder	Before each use													The user
137	Toolbox with various hand tools	None													
138	Tool bag with various hand tools	None													
139	Black and decker hand drill with 240V charger	Before each use													The user
140	Black and Decker drives set with 240V charger	Before each use													The user
141	First aid kit	3 Monthly in March, June,Sept,Dec			Done			Done							Alsco inspector
142	Fire extinguisher	Annually in October													
143	First aid kit	3 Monthly in March, June,Sept,Dec													Alsco inspector
144	Fire extinguisher	Annually in October													
145	Hi viz vest	Before each use													The user
146	Hard hat	Before each use													The user

B205

# Plant and Equipment Inspection Schedule

YEAR 2016

Business name	Maxicom (2013) Limited	Date inspected	31/08/16
Workplace/site address	20 Herekino Street Whangarei	Inspected by	Shaun Sutherland
Work Area or Group	All areas	Signature	Shaun Sutherland

**Use this form to 'schedule' when the Plant and Equipment is to be inspected for Hazards/Risks. Add either a '✓' or a 'X' to show when inspected, and record the Person(s) responsible.**

Use either, 1x form per 'Group' of Plant and Equipment, or 1x form per Work Area, or if small, 1x form for the entire workplace/site.

PE #	Plant / Equipment to be inspected	Frequency	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Person(s) responsible
147	Ear muffs	Before each use													
148	Safety glasses	Before each use													The user
149	First aid kit	3 Monthly in March, June, Sept, Dec			Done			Done							Alsco inspector
150	Fire extinguisher	Annually in October													
151	Step ladder	Before each use													The user
152	Hitachi power drill 240V	Before each use													The user
153	Tool box with various hand tools	None													
154	Hardhat	Before each use													The user
155	Hi Vis vest	Before each use													The user
156	First aid kit	3 Monthly in March, June, Sept, Dec			Done			Done							Alsco inspector

