

EQUIPMENT REVIEW FORM



EQUIPMENT: _____ LOCATION: _____

HANDLNIG BY _____ DESIGNATION _____

TYPE OF REVIEW

- NEW EQUIPMENT PURCHASE
- EQUIPMENT RE-LOCATION
- EUQIPMENT MODIFICAITON / ADD /REMOVE PARTS

CURRENT CONDITIOIN & RISK LEVEL

CONTROL MEASURES

RECOMMANDED – REQUIREMENTS

PLANNING FOR CHANGES / AMMENDMENTS / MODIFICAITONS

DOCUMENT CHANGES / EFFECTS

REVIEWED BY & COMMENTS

SIGN.

APPROVED BY