

PLAYGROUND SAFETY INSPECTION

Crawl Tubes Worksheet

(Complete one worksheet for each Crawl Tube)

Installation: Surface Deck

Height of Top Deck: _____
 Height of Lower Deck: _____

Yes	No	N/A	Shape:
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Straight
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	90 degree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	"S" shape
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	"C" shape

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Level
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sloped

Material:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coated Mesh
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Concrete
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Plastic
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Steel

Openings:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Open Ports
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	windows

Barrier Panels (ASTM F 2373-11 Section 8.3)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In an unlimited access setting, any platform with a fall height which is more than 18" has a barrier.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The barrier is 24" or more above the platform.

Use Zone (ASTM F 2373-11 Section 9.3.2)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In indoor and outdoor supervised settings the minimum use zone is 36"
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In settings with unlimited access the minimum use zone is 72"

Maintenance Condition: Good, Needs Repair

Priority: Priority 1 Priority 2 Priority 3 Compliant

Comments: _____

