



Department of Public Safety
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CLIMBING WALL FACILITY INSPECTION SUMMARY

An alternate form may not be used, however supplemental information may be attached.

The following report must be completed by the Certified Inspector and submitted to the owner, in compliance with 520 CMR 5.14 established by the Department of Public Safety for Climbing Wall Facility that employ fall protection systems.

(Inspection Company Name)

(Organization/Site Name)

(Inspection Company Address)

(Climbing Wall USID #)

(Inspection Company Contact Information: Phone/ Fax/Email)

(Climbing Wall Contact Person)

(Today's Date)

(Climbing Wall Contact Information: Phone/Fax/Email)

This form must be completed and submitted along with the inspection report completed by a Massachusetts Certified Inspector.

I certify under the penalties of perjury that to the best of my knowledge and belief that the Challenge Course elements employing fall protection systems and the related equipment listed on the following pages are in compliance with 520 CMR 5.15, except where noted in the accompanying Deficiency Report. I have personally inspected this equipment in accordance with 520 CMR 5.15.

(Signature of Inspector)

(Date of Inspection)

(Print Last Name)

(Certified Inspector License # / Expiration Date)

REVIEW CHECKLIST	Is it present?	
	Yes	No
Operations Manual		
Certified Inspector's Report from previous year (if applicable)		
Maintenance Repair Log (if any)		
Manufacturer's safety bulletins (if any)		
Accident/Incident Report Forms		
Emergency Action Plan		
Daily Equipment Inspection Log		
• Contains a complete list of equipment to be inspected on a daily basis		
• Each entry in the log is signed and dated by Challenge Course Staff		
• Records exist for the 12 months since the last inspection		

CERTIFIED INSPECTOR'S DEFICIENCY REPORT

A complete list of items found out of compliance with inspection standards

	Name of Deficient Component or structure	Reasons for Deficiency	Action Plan to Correct Deficiency
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			