

The following checklist is a guide. It may be used in its entirety or be modified to the specific user's needs by adding or subtracting items from the checklist. For questions concerning any item, contact the Office of Environmental Health and Safety.

(33) NOISE

Name: _____ Date : _____

Location of Inspection: _____

1. Are there areas in the workplace where continuous noise levels exceed 85 dBA? (To determine maximum allowable levels for intermittent or impact noise, see Title 8, Section 5097.)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
2. Are noise levels being measured using a sound level meter or an octave band analyzer and records being kept?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
3. Have you tried isolating noisy machinery from the rest of your operation?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
4. Have engineering controls been used to reduce excessive noise levels?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
5. Where engineering controls are determined not feasible, are administrative controls (i.e. worker rotation) being used to minimize individual employee exposure to noise?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
6. Is there an ongoing preventive health program to educate employees in safe levels of noise and exposure, effects of noise on their health, and use of personal protection?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____

7. Is the training repeated annually for employees exposed to continuous noise above 85 dBA?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____
8. Have work areas where noise levels make voice communication between employees difficult been identified and posted?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____
9. Is approved hearing protective equipment (noise attenuating devices) available to every employee working in areas where continuous noise levels exceed 85 dBA?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____
10. If you use ear protectors, are employees properly fitted and instructed in their use and care?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____
11. Are employees exposed to continuous noise above 85 dBA given periodic audiometric testing to ensure that you have an effective hearing protection system?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments: _____ _____ _____