

# PPE KIT CHECKLIST

QTY	CODE	ITEM DESCRIPTION	✓
1	1010103M	100% COTTON GLOVE	
1	1010106GRYL	POLYURETHANE GLOVE	
1	1010390GRNL	NITRILE GLOVE	
1	1102037	BUMP CAP GREEN	
1	2212183GRN	SAFETY HELMET GREEN	
1	1200115	EAR DEFENDER	
1	1301136	CLEAR SPECTACLE	
1	1400144	P3 MASK (PACK OF 5)	
1	2211645SYL	HI VIS VEST YELLOW	
1	6203181	BRANDED BAG	
1	5973129	EMERGENCY TAG	
1	1300146	CLEAR GOGGLE	
1	1010346TH10	CUT RESISTANT SLEEVE	

I ..... have checked the contents of my delivery as stated above and can confirm I have received all items listed. This form needs to be passed to your superior.

Signed ..... Date: ..... / ..... / .....

**ENGINEER COPY - Please retain for your records.**

----- PLEASE CUT HERE -----

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I ..... have checked the contents of my delivery as stated above and can confirm I have received all items listed. This form needs to be passed to your superior.

Signed ..... Date: ..... / ..... / .....

**OFFICE COPY - To be signed and handed to your superior on receipt of goods.**