Applicant/JBK Ref No.:	Inspector:				
Premise:	Date:				
Principal Investigator:	Time:				
Check (\checkmark) in the appropriate box that best describes the laboratory in which work will be performed.					
A. Laboratory Facilities		Yes	No	NA	Details/Comment
Is a universal biohazard symbol for BSL 2 posted the laboratory? Do the sign include name, and ph laboratory supervisor or other responsible persons	one number of the				
2. The design of the facility should be such that labo separated from common areas. (Examples offices	-				
Is a dedicated hand basin of the hands-free opera within each laboratory?					
4. Is furniture in the laboratory capable of supporting and uses?	g anticipated loads				
5. Are spaces between benches, cabinets and equip cleaning?	ment accessible for				
6. Are bench tops impervious to water and resista solvents, acids, alkalis, and other chemicals?	nt to heat, organic				
7. Is furniture including bench tops in the laborate non-porous material that can be easily cleaned?	ory covered with a				
8. If windows are present is it closed at all times?					
9. Is an autoclave for pre-treatment of laboratory w the contained facility?	astes is available in				
10. Is an eyewash fountain is readily available in the la	aboratory?				
11. Is an effective integrated pest management progr managed appropriately?	amme in place and				
12. Are laboratory floors smooth, easy to clean chemicals?	and resistant to				
13. Does the ventilation in the laboratory have direct the laboratory areas?	tional air flow into				
14. Is there a good housekeeping in the laboratory?					
B. Safety Equipment		Yes	No	NA	Details/Comment
15. Is there first aid kit available?					

16. Is there a Class II biological safety cabinet in the laboratory, certified annually?				
17. Is the BSC suitably located, away from door and air vent?				
18. Is the BSC free of equipment or supplies that can block the air grills and disrupt proper airflow?				
19. When lab personnel use vacuum lines with bio hazardous materials, are they protected with High Efficiency Particulate Air (HEPA) filters?				
20. Is equipment for use or storage of bio hazardous materials (i.e. refrigerator, freezers) labelled with a biohazard symbol?				
21. Is GM/LMOs are kept separately from non GM?				
22. Is there a fume hood for working with hazardous chemicals?				
C. PPE (Personal Protective Equipments)	Yes	No	NA	Details/Comment
23. Are suitable PPE available relevant to the hazard on the laboratory and used by laboratory personnel?				,
24. Are respiratory mask available for aerosol generating infectious work?				
25. Are covered shoes/foot cover used in the lab?				
D. Work Practices	Yes	No	NA	Details/Comment
D. Work Practices26. Is there any bio hazardous materials handled in the laboratory?	Yes	No	NA	Details/Comment
	Yes	No	NA	Details/Comment
26. Is there any bio hazardous materials handled in the laboratory?	Yes	No	NA	Details/Comment
26. Is there any bio hazardous materials handled in the laboratory?27. Do personnel wash their hands before leaving the lab?	Yes	No	NA	Details/Comment
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36. Are laboratory waste segregated into dedicated waste bins and			
labelled properly?			
37. Are suitable chemical disinfectant used for inactivating liquid waste?			
37. Are suitable elemical distinction ascarol inactivating liquid waste:			
38.Is a medical surveillance program in place for the laboratory			
personnel? (Example Hep B vaccination)			
39. Is there a Laboratory Biosafety Guidelines or Biosafety Manual in the			
laboratory?			
40. Are the lab specific Biosafety procedures incorporated into the			
Laboratory Biosafety Guidelines or Biosafety Manual?			
41. Are needle-locking syringes or safety hypodermic needles used when			
appropriate?			
42. Are bio hazardous materials transported in covered containers to			
prevent leakage?			
43. Is there any incident/accident/laboratory exposure reporting system			_
in place?			
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44. Is there an ERP in place?			
45. Is medical follow-up obtained if appropriate?			
46. Are animals and plants not associated with the work prohibited from			
the laboratory?			
47. Are any experiments involving animals and plants carried out in the			
laboratory?			
E. Records and Documents For:			
48. Procurement and transfers of GMO/LMO			
49. Biological material /LMO inventory			
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50. SOPs for contained use activity			
51. Staff training and competency			
52. Equipment maintenance			
53. Decontamination and validation			
54. Incident/accident/laboratory exposure			_

Additional comments/observations and recommendation :
Inspector's Signature:
Date: