

PELICAN ROPE

www.pelicanrope.com Tel: 800-464-7673

Safety Inspection Card

DATE: _____ BY: _____

LOCATION: _____

TYPE OF USE: _____

OEM PART# _____

INSPECTION CRITERIA:

(P) Pass (F) Fail	Pre-Use/Post-Use
-------------------	------------------

Abrasion _____ / _____

Glazing (Heat Damage) _____ / _____

Diameter Integrity _____ / _____

Discoloration _____ / _____

Flexibility _____ / _____

Core Fiber Exposure _____ / _____

Kinking or Hockling _____ / _____

NOTES:

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