|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | |  | | |  |  | |  | |
|  | |  |  | |  | |
|  | |  |  | |  | |
| **Navigation Cross Audit** | | | | | | |
| **Auditor:** | | | |  | | Date: |
| # | Item | | | Yes/No | | Action To Be Taken |
| **Housekeeping** | | | | | | |
| 1 | Is the navigation room clean of debris, floors swept and dry, trash removed regularly? | | |  | |  |
| 2 | Are all equipment, supplies and loose items secured against ship movement? | | |  | |  |
| 3 | Are open drinks near computers and laptops? | | |  | |  |
| 4 | Is the lighting adequate? | | |  | |  |
| 5 | Is the temperature/air conditioning satisfactory? | | |  | |  |
| **Safety** | | | | | | |
| 6 | Is the location of the First Aid kits known by personnel and clear of obstructions? | | |  | |  |
| 7 | Are the fire extinguishers obstructed? | | |  | |  |
| 8 | Are wire cables sufficently bundled or tied down to prevent hazards? | | |  | |  |
| 9 | Are exits clearly marked and not obstructed? | | |  | |  |
| 10 | Do people not involved in operations adhere to restrictions on door use? | | |  | |  |
| **Communications** | | | | | | |
| 10 | Is the phone working correctly? | | |  | |  |
| 11 | Are tool box meetings completed daily? | | |  | |  |
|  |  | | |  | |  |
| **Additional Comments:** | | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |
|  |  | | |  | |  |