

## 5S AUDIT CHECK SHEET

**ZONE NAME :** \_\_\_\_\_ **ZONE NO. :** \_\_\_\_\_ **DATE :** \_\_\_\_\_

**AUDITOR NAME :** \_\_\_\_\_ **ZONE LEADER :** \_\_\_\_\_

5'S'	S. No.	Contents	Max. marks	OBSERVATION	RESULT (Marks Obs.)	ACTION PLAN FOR NC'S	TARGET DATE	REMARKS
<b>SORT</b>	1	Is there something which is not of any use ?	5					
	2	files keeping place is clear or not ?	5					
	3	Is there any instrument, which is not in use ?	5					
	4	Whether all the infomative and notice objects are in proper shape or not ?	5					
<b>SET IN ORDER</b>	1	Whether the place to keep files,tools, parts,fixtures, is clean or not ? (almirah,rack etc)	5					
	2	Whether the files & all items is being kept in its appropriate place or not ?	5					
	3	Whether the instruments is being kept in boxes / almirha as per specific standard or not ?	5					
<b>SHINE</b>	1	Is there any dust,oil surface ?	5					
	2	Is the office place is neet and clean and all filing cabinate and storage area are clean.	5					
	3	All things clean to best possible extent?	5					
<b>STANDAR DISE</b>	1	What is the condition of files, instruments ,dusters and tools etc.?	5					
	2	Whether the related tools / remote / duster/ files are on place .	5					
<b>SUSTAIN</b>	1	Whether the every body is working as per working time or not ?	5					
	2	Whether the safety arrangement is ok or not ?	5					
	3	Whether dressing of uniform is ok or not ?	5					

<b>TOTAL MARKS</b>	75
<b>ACHIEVED MARKS</b>	

**AUDIT SCORE (%)**

<b>Scale</b>	1 Not followed 2 Followed partiality by default 3 Followed as per Standards/Instruction 4 Followed Consistently with awareness 5 Followed Showing Improvent
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**NOTE : IF 5S AUDIT SCORE LESS THAN 70% THEN ACTION PLAN TO BE SUBMITTED**

**AUDITEE SIGN. :-**

**AUDITOR SIGN. :-**