

SYDNEY TRAMWAY MUSEUM

SAFETY PERFORMANCE AUDIT CHECKLIST

Safety Performance Audit No. SPA.....	<i>Enter the area to be audited.</i>				Checklist No. – SPAC-??	Date:
	Name of Crew Member being audited:				Signature:	Member No.
	Name of Auditor:				Signature:	Member No.
Item No.	Area Of Audit:				Procedure No.s:	
	Requirement:	COMPLIES YES / NO	DEFICIENCY CATEGORY A B C			Comments
The auditor is to select, from the list below 5 items that the Traffic crew should know how to respond in an emergency.						
1						
2						
3						
4						
5						
6						
7						
8						
9						

Deficiency Category: A = Total/significant omission of criteria B = Significant number of minor deficiencies C = Single or isolated deficiency