

**Telecommuting Worksite Condition Checklist**

Employee Name:

Job Title:

Department:

Supervisor:

This list is designed to assess the overall safety and appropriateness of the telecommuting designated workspace. Your worksite should conform to the conditions below prior to beginning a telecommuting arrangement.

Identify location of telecommuting worksite:

(please provide the address and a description of the designated work area)

Requirements for an adequate and safe office space and/or area have been discussed, and the employee certifies that designated work area meets the following criteria:

1. The work space is suitable for the performance of official business.
2. The work space has sufficient telephone and internet access to enable timely completion of all assigned job duties and tasks.
3. The space is free of hazardous materials.
4. The space is free of indoor air quality problems.
5. There is adequate ventilation for the desired occupancy.
6. The space is free of noise hazards.
7. All stairs with four or more steps are equipped with handrails.
8. Electrical equipment is free of recognized hazards that would cause physical harm (e.g.: frayed wires, bare conductors, loose wires, flexible wires running through walls, exposed wires fixed to the ceiling, etc).
9. The building’s electrical system meets all required code requirements.
10. Aisles, doorways, and corners are free of obstruction to permit visibility and movement.
11. File cabinets and storage areas are arranged so drawers and doors do not open into walkways.
12. Chairs do not have any loose casters (wheels). The rungs and legs of chairs are sturdy.
13. Phone lines, electrical cords, and extension wires are secured.
14. Floor surfaces are clean, dry, level, and free of worn or frayed seams.

I certify that the designated work area meets the criteria set forth above.

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| Employee Signature:       | Date:       |
| Supervisor Signature:       | Date:       |

c: Human Resources