

Inspection Record for Complete Building

Record No.: _____

(only use this form for minor buildings)

Client: _____	Subcontractor: _____
Project No.: _____	Subcontract P.O. No.: _____
Project Name: _____	Building: _____

Reference document: _____

Items to inspect	Subcontractor		Company		Remarks
	inspected initials/date	Hold Point	inspected* initials/date		
1.0 Foundations/concrete works					
2.0 Blockwork					
3.0 Roofing/cladding					
4.0 Rain water drains					
5.0 Doors/windows					
6.0 Ceilings/partitions					
7.0 Wall finishing (interior)					
8.0 Wall finishing (exterior)					
9.0 Painting (interior)					
10.0 Painting (exterior)					
11.0 Sanitary/plumbing/drains					
12.0 HVAC					
13.0 Electrical					
14.0 Embedded steel e.g. switchgear supports					
15.0 Miscellaneous					

H - Company's presence is mandatory for all activities in section. Attachments, No. of pages: _____
 h - Company's presence is mandatory.

Accepted for Subcontractor	Accepted for Company	Accepted for Client
Name: _____	Name: _____	Name: _____
Signature: _____	Signature: _____	Signature: _____
Date: _____	Date: _____	Date: _____

* Company only initials for holdpoint