

CONSTRUCTION SITE INSPECTION FORM

Project Name: _____ Inspector: _____

Location: _____ Weather Conditions: _____

Inspection Details:

Date of Inspection: _____

Time of Inspection: _____

Inspection Start Time: _____ Inspection End Time: _____

Project Manager / Supervisor:

Name: _____

Contact Information: _____

Inspection Checklist:

- 1. Site Access and Security Measures in Place
- 2. Personal Protective Equipment (PPE) Usage
- 3. Scaffolding and Ladders Condition
- 4. Electrical Safety and Equipment
- 5. Hazardous Materials Storage and Handling
- 6. Fire Protection and Emergency Equipment
- 7. Machinery and Tools Condition and Use
- 8. Housekeeping and Debris Removal
- 9. Fall Protection Systems Installed
- 10. Excavations and Trenches Safety
- 11. Environmental Controls (Dust, Noise, etc.)
- 12. Material Storage and Handling
- 13. Temporary Structures Stability
- 14. Compliance with OSHA Regulations
- 15. Safety Signage and Barricades
- 16. Worker Training and Certifications
- 17. Incident or Near Miss Reporting Procedures
- 18. Site Lighting and Visibility
- 19. First Aid Kits and Medical Assistance Availability
- 20. Traffic and Vehicle Movement Controls

Observations and Comments:

By signing this Construction Site Inspection Form, the parties acknowledge that the inspection was conducted in good faith and that all observations and corrective actions are documented accurately. This form is legally binding and enforceable under United States law. Both Inspector and Project Manager agree to comply with all applicable federal, state, and local regulations pertaining to construction site safety and environmental protection.

INSPECTOR'S SIGNATURE

PROJECT MANAGER'S SIGNATURE

Signature: _____

Signature: _____

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