

Construction Quality Control Checklist

General Information

- **Company Name:** [Insert Company Name]
- **Project Name:** [Insert Project Name]
- **Location:** [Insert Site Location]
- **Date of Inspection:** [Insert Date]
- **Inspector Name:** [Insert Inspector's Name]
- **Supervisor/Manager:** [Insert Supervisor/Manager Name]

Checklist Items

No.	Item/Task Description	Specification/Standard	Inspection Method	Status (Pass/Fail/NA)	Comments/Notes
1	Foundation Inspection	[Specify Standard]	[Visual, Measurement]	[Pass/Fail/NA]	[Notes or Findings]
2	Structural Framework	[Specify Standard]	[Visual, Measurement]	[Pass/Fail/NA]	[Notes or Findings]
3	Reinforcement Placement	[Specify Standard]	[Measurement]	[Pass/Fail/NA]	[Notes or Findings]
4	Concrete Pouring	[Specify Standard]	[Test, Measurement]	[Pass/Fail/NA]	[Notes or Findings]

5	Electrical Installation	[Specify Standard]	[Test, Visual]	[Pass/Fail/NA]	[Notes or Findings]
6	Plumbing Systems	[Specify Standard]	[Test, Measurement]	[Pass/Fail/NA]	[Notes or Findings]
7	Roofing and Waterproofing	[Specify Standard]	[Visual, Measurement]	[Pass/Fail/NA]	[Notes or Findings]
8	Finishing (Painting, Tiling, etc.)	[Specify Standard]	[Visual Inspection]	[Pass/Fail/NA]	[Notes or Findings]

Inspector and Supervisor Sign-off

Inspector Name	Signature	Date
[Insert Name]	[Insert Signature]	[Insert Date]

Supervisor Name	Signature	Date
[Insert Name]	[Insert Signature]	[Insert Date]