Job Site Inspection Report Template

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Job Site Inspection Checklist

Project Details:

Project Name:	
Project Number:	
Location:	
Date of Inspection:	
Time of Inspection:	
Inspected By:	(Name & Position)
Supervisor on Site:	

1. General Site Conditions:

Cleanliness and Order:

[] Well-maintained

[] Needs improvement

[] Unsatisfactory

Access and Egress:

[] Safe

[] Obstructed

[] Unsafe

Site Signage:

- [] Visible and clear
- [] Partially obscured
- [] Missing or damaged
- 2. Safety & Health:

Personal Protective Equipment (PPE):

- [] Adequate
- [] Insufficient
- [] Not in use

First Aid & Emergency Facilities:

[] Available and stocked

- [] Partially stocked
- [] Unavailable

Fire Safety Equipment:

- [] Accessible and operational
- [] Partially operational
- [] Non-functional or missing

Hazardous Materials Handling & Storage:

[] Safe and labeled

[] Poorly stored

- [] Openly exposed or leaking
- 3. Tools & Machinery:

Condition and Maintenance:

- [] Good
- [] Fair
- [] Poor

Storage:

- [] Properly stored
- [] Disorganized
- [] Left in hazardous conditions

Operation:

- [] Safe procedures followed
- [] Occasional lapses in safety
- [] Unsafe practices observed
- 4. Electrical Safety:

Cables & Extension Cords:

- [] Well-organized and protected
- [] Exposed in some areas
- [] Multiple trip hazards

Tools & Machinery:

- [] Grounded and safely connected
- [] Some grounding issues
- [] Openly exposed connections
- 5. Structural Inspections:

Scaffolding:

- [] Stable and secure
- [] Minor stability issues
- [] Unsafe and wobbly

Trenches & Excavations:

- [] Shored and secure
- [] Occasional shoring issues
- [] Collapsing hazards observed

6. Environmental Concerns:

Dust & Air Quality:

- [] Controlled
- [] Moderate dust observed
- [] Heavy dust with no controls

Waste Management:

- [] Properly segregated and stored
- [] Mixed waste
- [] Open littering observed

Comments & Observations:

(Provide detailed notes on any of the above points or any other concerns observed during the inspection.)

Recommendations:

(Provide actionable steps based on the observations.)

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Sign-Off:

Inspector:		
Signature:	Date:	
Site Supervisor:		

Signature: [Date:
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