|  |  |
| --- | --- |
|  | Checklist 10-2: **Nail up Boxes (TS2)**  |
| MC Development Corp. | Project: | Contractor: |
| **Number** | **Checkpoints** | BI | DI | AI |
| **1** | Electrical Boxes are supplied correctly  |  |  |  |
| **Comment** |  |
| **2** | Double check the plans and marks on the walls and ceiling  |  |  |  |
| **Comment** |  |
| **3** | Supplies are distributed around the house properly and according to the plan scripts |  |  |  |
| **Comment** |  |
| **4** | Duplex outlets roughed at 14 1/2" with a tolerance of +/-1/4" |  |  |  |
| **Comment** |  |
| **5** | Counter top and garage outlets roughed at 44" with a tolerance of +/-1/4" |  |  |  |
| **Comment** |  |
| **6** | All similar boxes are leveled and plumbed  |  |  |  |
| **Comment** |  |
| **7** | The thickness of drywall has been considered for all boxes, double check them  |  |  |  |
| **Comment** |  |
| **8** | Ceiling boxes are per plan (approved by PM) within 1/2 inch  |  |  |  |
| **Comment** |  |
| **9** | Outlets, switches, fixture, phone and TV locations per plan |  |  |  |
| **Comment** |  |
| **Quality Scores and Completion Sign-off** |
| **Inspection#**Quality 5 4 3 2 1 Notes:On-Time 5 4 3 2 1 Notes:Sign and date\*: Cell # / ID #: Signed: Date: Task has been verified complete and in compliance with contract drawings and specifications except for non-conformances and incomplete items reported above. |
| **BI=** Inspection **B**efore task begin **-----------DI=** Inspection **D**uring task in-process --------**AI=** Inspection **A**fter task completed*Quality Score**5 = 100% NO problems 4 = 1 minor problems 3 = Hotspot or 2-3 minor 2 = 6+ or major problems 1 = Excessive problems****On-Time Score*** *5 = On Time 4 = Late 3 = Late by 1 day 2 = Late by 2 days 1 = Late more than 2 days****Safety Score*** *5 = 100% NO problems 4 = 1 minor problem 3 = Hotspot or 2-3 minor 2= 4+ or major problem 1= Injury* |