|  |
| --- |
| Number [**00 00 00]** and Name **[“Inspection Checklist Template”] [New Work Method (WM)** or **Inspection Checklist (ICL)] [For you to create and populate, numbering per Master-Format numbering system [example 03 00 00 = Concrete]**  |
| Project:Contract#: | LocationPhase: | GC Forman Name, coordinates,Or Subcontractor Rep Name, coordinates, | Crew: |
| testThe |
| **Inspection Checklist Preparation** Yes N/AProject Specifications and schedule available to ICL writer. The following preconstruction WM activity items for Contractor or Subcontractor are to be reviewed or performed at the beginning of this WM or Inspection Checklist initiation. 10.01 Permits obtained by the party ...10.02 Material submittals submitted to level above (GC or Owner’s Rep) and approval received.10.03 This WM and Inspection Checklist have been submitted, and approved prior to use.10.04 QMP 4.1a Pre-Mobilization Agenda and Meeting - one sub at a time has been held.10.05 Previous crew has completed their work and work is per specifications or PM contacted and the situation rectified.10.06 Survey and layout reference points are in place and/or the basis for layout is documented and clear.10.07 Superintendent has been notified, start date is scheduled. 10.08 WM Review Meeting per QMP 4.2 has been held and any revisions to the WM from that meeting are made, distributed.10.09 Compliance with **safety** policies and procedures has been reviewed and accepted.**10.10 Environmental management** and **LEED** considerations (waste)**Approval of Inspection Checklist:** The above items are provided by Sub Rep (for subcontractor) for GC approval [x] \_\_\_\_\_\_\_\_\_\_Provided by GC Foreman for GC self-performed work. Ready for approval by the Superintendent or Owner’s Rep. [ ] Sign\_\_\_ \_\_\_\_\_\_\_\_\_\_\_Approval by GC Rep [ ] Sign: \_\_\_\_\_\_\_\_\_\_\_Approval by Owner’s Rep [ ] Sign: \_\_\_\_\_\_\_\_\_\_\_ |

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| --- | --- | --- | --- |
|  | **Implementation****Checkpoints** | **Yes** | **NA** |
|  | Project Participants understand responsibilities (per WM Review Meeting training). | [ ]  | [ ]  |
|  | Special materials, Ordered, scheduled by foreman | [ ]  | [ ]  |
|  | Initial Inspection per QMP 4.3 held and thereafter,  | [ ]  | [ ]  |
|  | Work Method compliance confirmed via inspection and test plan and/or Inspection Checklist**,** signed, dated. | [ ]  | [ ]  |
|  | If Sub Rep finds deficiencies, photograph, then they correct them prior to signing the Inspection Checklist. Corrective Action to fix the WM or ICL and minimize future deficiencies will be applauded. | [ ]  | [ ]  |
|  | GC Supervisor Review - compliance verification | [ ]  | [ ]  |
|  | Where the GC Superintendent finds deficiencies, they become nonconformances, are photographed, sent to Sub Rep to fix. | [ ]  | [ ]  |
|  | Corrective Action, and the fix of the process may be required | [ ]  | [ ]  |
|  |  |  |  |
|  | **Work Method (Task) Specific checklist items (per spec):**Work Method items (name and number) should match with the inspection checklist. | [x]  |  |
| 1 |  | [ ]  | [ ]  |
| 2 |  | [ ]  | [ ]  |
| 3 |  | [ ]  | [ ]  |
| 4 |  | [ ]  | [ ]  |
| 5 |  | [ ]  | [ ]  |
| 6 |  | [ ]  | [ ]  |
| 7 | [Add rows as is needed] | [ ]  | [x]  |

 **Comments: This chart needs** * **“instructions to user” on the page before.**
* **Checkboxes in left column**
 |
| Light grey font is indicating items that the checklist writer needs to complete and fill in in accordance with Checklist user needs (your call, your words, but per plans and specifications). The above items will remind you of the basics that need checking. test  |  |

**Inspection Checklist Preparation** Yes N/A

Project Specifications and schedule available to ICL writer. [x]

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10.09 Compliance with **safety** policies and procedures has been reviewed and accepted.

**10.10 Environmental management** and **LEED** considerations (waste)

**Approval of Inspection Checklist:**

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Provided by GC Foreman for GC self-performed work. Ready for approval by the Superintendent or Owner’s Rep. [ ] Sign\_\_\_ \_\_\_\_\_\_\_\_\_\_\_Approval by GC Rep [ ] Sign: \_\_\_\_\_\_\_\_\_\_\_

Approval by Owner’s Rep [ ] Sign: \_\_\_\_\_\_\_\_\_\_\_