

Quality Assurance Inspection Checklist

Project Name

Location

Date

Inspector

Inspection Item	Criteria	Pass	Fail	Comments
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	

Additional Notes:

Inspector Signature

Date