

Quality Control Inspection Report

General Information

Project / Facility Name: _____

Location: _____

Inspection Date: _____

Inspector Name: _____

Inspection Reference No.: _____

Inspection Checklist

Item	Compliance Standard	Conforms	Non-Conformity	Remarks
1.				
2.				
3.				
4.				
5.				

Additional Remarks

Inspector Signature: _____

Date: _____

Supervisor Signature: _____

Date: _____