

Construction Site Safety Inspection Report

Site Name: _____

Location: _____

Date: _____

Project Manager: _____

Inspector Name: _____

Inspection Time: _____

Safety Inspection Checklist

Item	Compliant (Yes/No)	Comments / Actions Needed
Personal protective equipment (PPE) being used		
Site housekeeping (clear of debris, materials stored properly)		
Working at heights (guardrails, fall protection in place)		
Scaffolding and ladders safe and secure		
Electrical safety (cords, panels, grounding)		
Machinery & tools condition and use		
Excavation and trenching safety		
Fire prevention and control		
Hazardous substances properly labeled/stored		
First aid kits and emergency contact info accessible		

Details of Non-Compliance & Corrective Actions

Sign-off

Inspector Signature: _____

Date: _____

Project Manager Signature: _____

Date: _____