

# Construction Environmental Evaluation Checklist

Project Name:

Location:

Date:

Inspector Name:

Contractor:

## Evaluation Criteria

Checklist Item	Yes	No	N/A
Site is free of visible contamination or hazardous material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper management of waste and construction debris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dust and emissions control measures implemented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No evidence of water pollution or runoff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise generation within acceptable limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soil erosion control measures in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection of vegetation and wildlife observed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency response and spill kits available onsite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Material storage areas properly contained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment maintenance and fueling in designated areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Observations / Comments:

Inspector Signature:

Date: