

Blank Residential Construction Site Checklist

Project Name: _____

Site Address

Date

Inspector Name

Contractor

No.	Checklist Item	Yes	No	Comments / Action Required
1	Site access is clear and safe			
2	Fencing and barriers are in place			
3	Personal Protective Equipment (PPE) used			
4	Material storage is organized and safe			
5	Signage is visible and accurate			
6	Hazardous materials properly handled/stored			
7	Waste and debris managed properly			
8	Temporary power/electrical is safe			
9	First aid kit available and stocked			
10	Emergency procedures posted			

Additional Notes / Observations:

Inspector Signature

Date
