

CHECKLIST (to be completed by site manager/supervisor)

Company: \_\_\_\_\_

Site: \_\_\_\_\_

Plot: \_\_\_\_\_ Site manager/supervisor: \_\_\_\_\_

Table with 4 columns: Ref., Item, Yes (✓), No (✓), Inspected (initials & date). Contains 11 checklist items regarding wall linings, sheathing boards, stud frames, absorbent material, joints, and services.

Notes (include details of any corrective action)
Site manager/supervisor signature .....

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