

Temporary Fencing and Barricade Inspection Form

Project Name

Location

Inspection Date

Inspector Name

Weather Conditions

Inspection Item	Compliant	Non-Compliant	N/A	Comments
Fencing/Barricade properly installed and stable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
No visible damage or missing sections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Footings and supports secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Warning signage in place and clear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Access points secured (gates, entries)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Required Actions/Notes

Inspector Signature

