

Commercial Construction Safety Inspection Checklist

Project Name

Location

Inspector Name

Date

General Safety

Item	Compliant	Non-Compliant	N/A	Comments/Action Needed
Emergency exits accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
First aid supplies available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Housekeeping (clean, clear walkways)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

PPE (Personal Protective Equipment)

Item	Compliant	Non-Compliant	N/A	Comments/Action Needed
Hard hats worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Safety glasses worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

High-visibility clothing worn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
-------------------------------	--------------------------	--------------------------	--------------------------	-------------

Falls/Site Protection

Item	Compliant	Non-Compliant	N/A	Comments/Action Needed
Fall protection used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Guardrails in place where needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Floor openings covered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Equipment & Tools

Item	Compliant	Non-Compliant	N/A	Comments/Action Needed
Equipment inspected daily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Proper tool use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Extension cords in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Other Observations

Corrective Actions Taken

Inspector Signature

Date