

# Drywall Installation Quality Assurance

Project Name

Location

Date

Inspector

Checklist Item	Pass	Fail	Comments
Drywall sheets securely attached to framing	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Joints properly aligned and staggered	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Fasteners properly installed and set	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Cutouts for electrical/plumbing precise	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Surface free of damage and defects	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Joints properly taped and finished	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>
Control joints correctly installed (if required)	<input type="checkbox"/>	<input type="checkbox"/>	<div></div>

Additional Notes

Signature

**Date**