Commercial Renovation Quality Control Checklist

Date:	Project Name:	Inspector:
-------	---------------	------------

1. General Site Condition

Item	Yes	No	N/A	Comments
Site is clean and free of debris				
Work area is safe and accessible				
Proper signage installed				

2. Structural Work

Item	Yes	No	N/A	Comments
Demolition completed as specified				
Structural repairs completed				
New walls/plastering done properly				

3. Electrical

Item	Yes	No	N/A	Comments
Wiring installed to code				
Outlets/switches tested and working				
Lighting installed and working				

4. Plumbing

Item	Yes	No	N/A	Comments
New fixtures installed				
No leaks detected				
Drains and water flow properly				

5. HVAC

Item	Yes	No	N/A	Comments
Heating/cooling operational				
Thermostat functioning correctly				

Item	Yes	No	N/	A	Comments
Painting completed					
Flooring/tiles installed					
Ceilings finished and clean					
Punch list items completed					
Punch list items completed Keys and documentation handed over					
Keys and documentation handed over					
Keys and documentation handed over					

Airflows and vents installed