

Plumbing Installation Quality Control Checklist

Project Name:

Location:

Date:

Inspector:

No.	Checklist Item	Yes	No	Remarks
1	Materials comply with specifications			
2	Pipes are free from damage/defects			
3	Correct pipe support and alignment provided			
4	Joints and connections properly installed			
5	Leak tests performed and passed			
6	Valves installed and accessible			
7	Pipes properly insulated (if required)			
8	Fixtures installed at correct locations and heights			
9	System flushed after installation			
10	Work area cleaned after installation			

Additional Comments:

Inspector Signature: