

DC Cabling Inspection Record

Project Name:

Location:

Date:

Inspector Name:

Inspection Details

No.	Item	Checkpoints	Status	Remarks
1	Physical Damage	Check for any visible damage on cables		
2	Polarity	Confirm correct cable polarity		
3	Cable Termination	Ensure cable terminations are secure		
4	Insulation	Inspect for proper cable insulation		
5	Identification	Check if cables are properly labeled		
6	Support/Fixing	Verify adequate cable supports		
7	Separation	Ensure proper separation from other services		

General Remarks:

Inspector Signature:

Date: