

Framing Layout Verification Checklist

General Site Conditions & Documentation

Verifies the readiness of the site and confirms access to necessary documents before layout begins.

Date of Layout Ve	rification	
Enter date		
ime of Layout Ve	rification	
Project Location		
	Set My Current Location	

Write something		
Drawing Set Used for V	erification	
Revision A		
Revision B		
Revision C		
Other (Specify)		
Copy of Approved Fram	ning Layout Plans	
	ning Layout Plans	
	ing Layout Plans	
♣ Upload File	ning Layout Plans	
L Upload File Permit Status Approved Pending	ning Layout Plans	
L Upload File Permit Status Approved	ning Layout Plans	
L Upload File Permit Status Approved Pending	ning Layout Plans	
L Upload File Permit Status Approved Pending		

Foundation Verification

Confirms the foundation is prepared and meets tolerances before framing begins.

Foundation Elevation (Existing)
Enter a number
Foundation Elevation (Proposed)
Enter a number
Foundation Levelness Deviation (Max)
Enter a number
Foundation Type
Poured Concrete
Concrete Block
Crawlspace
Slab-on-Grade
Rebar Size Verification
Verified
Not Verified
Rebar Spacing (Inches)
Enter a number

Comments/Observations (Foundation)	
Write something	
Foundation As-Built Drawing (Uploaded) 4 Upload File	
Vall Layout Verification ocuses on verifying the position and dimensions of exterior and interior v	valls.
Wall Offset from Property Line (East)	
Enter a number	
Wall Offset from Property Line (West)	
Wall Offset from Property Line (West) Enter a number	
Enter a number	
Enter a number Wall Length (Wall 1)	

Wall Thickness (Check consistency)	
Enter a number	
Wall Alignment (Consistent with plans?)	
Yes	
□ No	
□ NA	
Interior Wall Location (Consistent with plans?)	
Yes	
No No	
NA	
Notes on Wall Layout Discrepancies (if any) Write something	
seam and Header Layout necks the location and dimensions of beams, headers, and other load-be	earing elements
Beam Elevation (Top of Beam)	
Enter a number	
Enter a number	
Header Height (Bottom of Joist)	

Beam Width
Enter a number
Header Width Enter a number
Beam/Header Material Type SPF Lumber LVL Glulam Steel Other
Bearing Length (Beam) Enter a number
Bearing Length (Header) Enter a number
Connection Type Nail Bolt Screw Other

Notes/Comments	
Write something	
oor and Window Openings	
sures proper placement and size of door and window opening	S.
Window Sill Height (above finished floor)	
Enter a number	
Window Header Height (above finished floor)	
Enter a number	
Door Head Height (above finished floor)	
Enter a number	
Litter a number	
Door Sill Height (above finished floor)	
Enter a number	
Window Width (actual measurement)	
Window Width (actual measurement) Enter a number	

Enter a number	
Door Width (actual measurement)	
Enter a number	
Door Height (actual measurement)	
Enter a number	
Window Opening Squareness	
Square	
Slightly Out of Square	
Significantly Out of Square	
Notes/Corrections Required (if any)	
Write something	
tairway Layout (If Applicable)	
rification of stairway location, rise, run, and headroom.	
Total Rise (inches)	
. ,	

Total Run (inches)
Enter a number
Rise per Step (inches)
Enter a number
Run per Step (inches)
Enter a number
Nosing (inches)
Enter a number
Stairway Type
Straight Run
─ Winding─ Spiral
Split (Double) Stringer
Headroom (minimum 9ft or as per code) (inches)
Enter a number
Handrail Presence
Yes
□ No

Enter a number Bearing Wall Thickness (inches) Enter a number Shear Wall Type (per structural drawings) Plywood Sheathed OSB Sheathed Composite Sheathing Other (Specify in Long Text)	earing wall placement, reinforcement, and thickness.
Shear Wall/Bearing Wall Layout Drawing Version Latest Revision Previous Revision Shear Wall Thickness (inches) Enter a number Bearing Wall Thickness (inches) Enter a number Shear Wall Type (per structural drawings) Plywood Sheathed OSB Sheathed Composite Sheathing Other (Specify in Long Text) f'Other' Shear Wall Type Selected, Please Specify:	
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Composite Sheathing Other (Specify in Long Text) If 'Other' Shear Wall Type Selected, Please Specify:	turar urawings)
Other (Specify in Long Text) If 'Other' Shear Wall Type Selected, Please Specify:	
If 'Other' Shear Wall Type Selected, Please Specify:	
Write something	Selected, Please Specify:
Wite comeaning	

Enter a number		
Nail Spacing (in	hes) - Vertical	
Enter a number		
Reinforcement	heck (Select all that apply)	
Vertical Rebar	esent	
Horizontal Reb		
Shear Wall And	ors Installed	
None Required		
Location of She	r Wall Detail for verification	
Location of She	r Wall Detail for verification Set My Current Location	
Location of She		

Final Review & Sign-Off

A final check and authorization before proceeding with framing.

Enter date	
Time of Final Verification	
Summary of Findings/Discrepancies	
Write something	
Corrective Actions Taken	
Write something	
Overall Verification Status	
Approved	
Conditional Approval (See Notes) Rejected (See Notes)	
Inspector Name	
Write something	
Inspector Signature	

Revisions/Rework Required (if any)

Enter a number...

Supporting Photos/Documents (if applicable)

