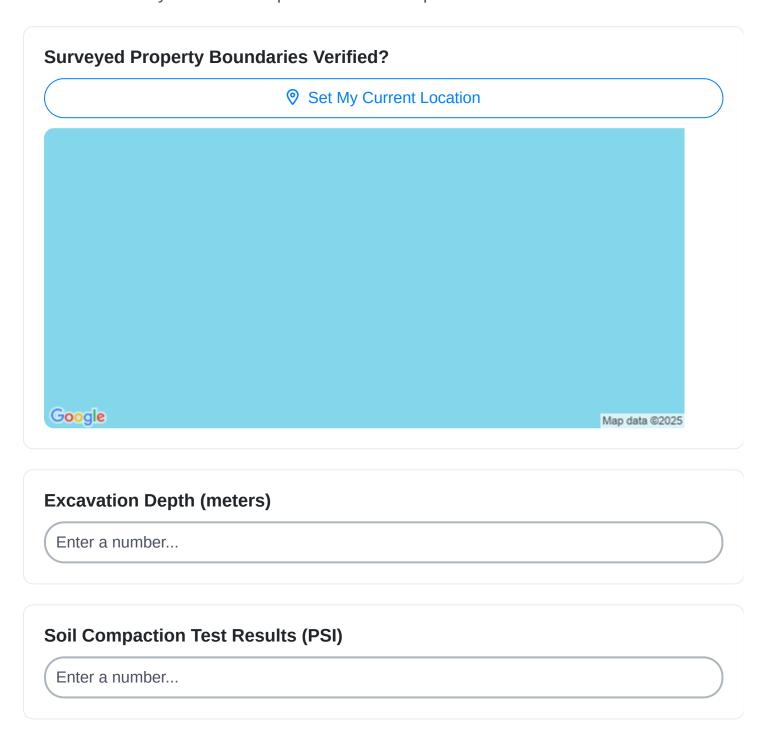


# **Operation and Functionality Checklist**

#### **Site Preparation & Excavation**

Covers initial site clearing, grading, and excavation activities. Ensures proper soil conditions and layout for subsequent construction phases.



### **Foundation & Concrete Work**

Concrete Pour Thickness (inches)	
Enter a number	
Concrete Strength (PSI)	
Enter a number	
Concrete Mix Design Verified?  Yes  No N/A	
Reinforcement Placement Correct?  Yes  No N/A	
Concrete Pour Date	
Enter date	
Observations during Concrete Pour	
Write something	

Concrete Pour Photos       Upload File
Curing Time (Days)
Enter a number
Curing Method  Water Curing  Membrane Curing  Steam Curing  Other
Structural Framework Covers the erection of the building's structural components (steel, wood, etc.) ensuring tability and alignment.
Column Spacing (ft)
Enter a number
Beam Elevation (ft)
Enter a number

Steel Grade Verification  A36  A572 Grade 50  Other (Specify in Long Text)
If 'Other' Steel Grade Selected, Specify:
Write something
Bolt Tightness Torque (ft-lbs)
Enter a number
Welder Certification Status
Certified
☐ Pending ☐ Not Certified
Upload Welding Inspection Report
♣ Upload File
Diagonal Bracing Connection Verification (degrees)
Enter a number

Date of Structural Framework Inspection	
Enter date	
Building Envelope (Walls & Roofing	)
Addresses the exterior shell of the building – walls, roofing, wind on weatherproofing and energy efficiency.	
Roof Slope (Degrees)	
Enter a number	
Roofing Material Type	
Asphalt Shingles	
Metal Roofing	
Tile	
Membrane Roofing	
Other	
Wall Insulation R-Value	
Enter a number	
Window Glazing Type	
Single Pane	
Double Pane	
☐ Low-E	
Triple Pane	

Notes on Wall Waterproofing Application	
Write something	
	<i>],</i> 
Upload Photo of Window Installation	
4 Upload File	
Siding Material	
☐ Vinyl	
Wood	
Stucco	
☐ Brick	
Metal Metal	
Date of Waterproofing Application	
Enter date	
lookaniaal Electrical and Dlumbing (MED)	
lechanical, Electrical, and Plumbing (MEP)	
aluates the functionality of the building's essential systems – HVAC, electrical stribution, plumbing, and fire suppression.	
HVAC System Capacity (BTU/hr)	
Enter a number	

Enter a number	
Water Main Size (inches)	
Enter a number	
Fire Suppression System Type	
Sprinkler System	
Standpipe System	
Fire Extinguishers	
Other	
Electrical Safety Tests Performed?	
Grounding Continuity	
Insulation Resistance	
Polarity Check	
GFCI Functionality	
HVAC System Commissioning Date	
Enter date	
Notes on Dlumbing Look Tooting	
Notes on Plumbing Leak Testing	
Write something	

Electrical Load Calculation Report  L Upload File
Plumbing Backflow Preventer Status  Installed and Tested Installed - Testing Required  Not Installed
Interior Finishes  Covers the installation of interior walls, flooring, ceilings, and other aesthetic and functional finishes.
Wall Paint Coverage (sq ft/gallon)  Enter a number
Flooring Type Verified?  Vinyl Tile Carpet Wood Concrete
Notes on Flooring Installation Issues (if any)  Write something

Ceiling Finish Applied?  Spray Foam Acoustic Panels Drywall Suspended Grid
Date of Final Finish Inspection  Enter date
Trim Work Completed?  Yes No Partial
Photos of Finish Work  L Upload File
Detailed Description of any Finish Defects Found  Write something

## **Accessibility & Safety**

Verifies compliance with accessibility standards and safety regulations throughout the construction process and completed project.

Confirm Presence of Required Signage (ADA compliant)  Yes  No  Not Applicable
Number of Fall Protection Harnesses Available & Inspected  Enter a number
Safety Training Completed (Select all that apply)  OSHA 10-Hour OSHA 30-Hour Fall Protection Confined Space Entry First Aid/CPR
Fire Extinguisher Inspection - Date and Condition  Pass - Up to Date Fail - Needs attention  Not Applicable
Last Site Safety Meeting Date  Enter date
Record of Near Miss Incidents (if any)  Write something

Confirm Availability of First Aid Kit  Yes  No
Upload Site Safety Inspection Report (if available)   Lipidad File
Equipment Operation & Calibration  Checks the proper operation and calibration of construction equipment, including cranes, ifts, and power tools.
Crane Load Capacity (tons)
Enter a number
Excavator Engine Hour Reading
Enter a number
Generator Fuel Level (%)
Enter a number
Pre-Operation Inspection Checklist Completed?  Yes No

Equipment Manual Available & On-Site?	
Yes	
No	
Last Calibration Date (e.g., Load Cell)	
Enter date	
Time of Last Equipment Start-up	
Any unusual noises or behavior observed during operation?	
Write something	
Which safety devices were checked?	
Backup Alarm	
Safety Lights	
Emergency Stop	
Overload Protection	
Matarial Harallinas C. Otarrasa	
Material Handling & Storage	
Assesses the procedures for handling and storing construction materials to pro	event
damage and ensure availability.	

Enter a number...

Material Storage Area Condition (Pre-Construction)  Clean and Organized  Moderately Clean  Needs Improvement  Unacceptable
Material Protection Measures Implemented  Tarps/Covers Elevated Pallets Designated Storage Areas Security Fencing Climate Control (if applicable)
Date of Last Material Inventory Check  Enter date
Any observed issues with material handling or storage. Describe in detail.  Write something
Forklift/Crane Operator Certification Status  All Operators Certified  Some Operators Certified  No Operators Certified

#### Photograph of designated storage area



#### **Waste Management & Environmental Compliance**

Confirms adherence to waste management protocols and environmental regulations during construction.

Estimated Waste Volume (cubic yards)  Enter a number	
Mosto Ctusous Consusted (Coloct all that apply)	
Waste Streams Generated (Select all that apply)  Concrete & Demolition Debris	
Wood & Lumber	
☐ Metals	
Plastics	
Cardboard & Paper	
Hazardous Waste (Specify in LONG_TEXT)	
Hazardous Waste Details (if selected above)	
Write something	

Waste Disposal Method  Recycling  Landfill  Waste-to-Energy  Other (Specify in LONG_TEXT)
Other Disposal Method Details (if selected above)
Write something
Spill Prevention Plan in Place?  Yes  No N/A
Last Environmental Compliance Training Date
Enter date
Waste Manifest Records (Upload)  L Upload File
Number of Erosion Control Measures Installed
Enter a number