



SAMPLE DOCUMENT

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Inspection Check List

Date _____

Between the Owner: **Owner's Name**
Address
Phone Number

And the Contractor: **Contractor's Name**
License Number
Address
Phone Number

For the Project: **Project Name**
Address

INSTRUCTIONS: Inspect the project and carefully check whether all items meet the specifications. Initial in the space marked "Satisfactory" if the item meets specifications. If an item is not satisfactory, describe the problem in the "Description" field. Add any additional information where necessary. Modify the list to fit your finish schedule. After all items have been completed, you will need to make a second inspection and report for final approval.

Item	Satisfactory	Description
Foyer		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Dining Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		

Initialed by: BU

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Inspection Check List
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Doors		
Trim Mouldings		
Living Room		
Floors		
Ceilings		
Walls		
Woodwork		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Fireplace		
Kitchen		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Cabinets		
Countertop		
Sink		
Oven and range		
Hood and exhaust fan		
Microwave		
Dishwasher		
Disposal		
Trash Compactor		

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Inspection Check List
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Breakfast Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Family Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Woodwork		
Powder Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Vanity		
Toilet		
Towel Bar		
Paper Holder		

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Inspection Check List
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Utility Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Hot Water Heater		
Furnace/Heat Pump		
Washer Hook up		
Dryer Hook up		
Master Bedroom		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Master Bath		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Vanity		
Toilet		

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Inspection Check List
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Whirlpool/Garden Tub		
Shower		
Shower door		
Towel Bar		
Paper Holder		
Bedroom Two		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Bedroom Three		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Bedroom Four		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		

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Inspection Check List
Project Name

Trim Mouldings		
Bedroom Five		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Bath Two		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Vanity		
Toilet		
Shower		
Shower door		
Towel Bar		
Paper Holder		
Bath Three		
Floors		
Ceilings		
Walls		
Light Fixtures		

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Inspection Check List
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Windows		
Doors		
Trim Mouldings		
Vanity		
Toilet		
Whirlpool/Garden Tub		
Shower		
Shower door		
Towel Bar		
Paper Holder		
Bath Four		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Vanity		
Toilet		
Whirlpool/Garden Tub		
Shower		
Shower door		
Towel Bar		
Paper Holder		
Hallway		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		

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Inspection Check List
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Trim Mouldings		
Garage		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Garage Door		
Garage Door Opener		
Storage Area		
Study / Library		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		
Additional Room		
Floors		
Ceilings		
Walls		
Light Fixtures		
Windows		
Doors		
Trim Mouldings		

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Inspection Check List
Project Name

FIRST INSPECTION

Having inspected the project listed herein, except for those specific items Buyer accepts the project as is, in satisfactory condition and understands a claim against the contractor for any overlooked items not listed above to be seen in the buyer's inspection. The Buyer has discussed the specific items and understands that the contractor makes no other guarantees or warranties that are stated in the contract documents.

Contractors Signature

Date

Owner's Signature

Date

SECOND INSPECTION

Having re-inspected the project listed herein, the Buyer has initiated inspection that needed to be completed. By signing below, the Buyer accepts the project in satisfactory condition, and understands the coverage and duration of warranty has been limited to **one** year from the date of occupancy or final payment, whichever is later.

Contractor's Signature

Date

Owner's Signature

Date



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