VERIFICATION INSPECTION CHECKLIST									
TRADE:	Form	work					Date:		
PROJECT	NAME:						Lot No.:		
Item	✓/X	Description							
1		Installer & Proline Project Manager to tick off items when checked							
2		Safe Work Method Statement received, read and understood by Workers prior to commencement							
Section	Complete	Subcontrac Sign:	tor Name:	Compa	any:	Proline sign:		Date:	
Installation: <u>(Subcontractor &amp; Proline Site Manager to tick off items when checked)</u>									
3		Work is proceeding in accordance with plans and specifications							
4		Thickness / grade of plywood and grade of section of backing timbers comply with temp works design							
5		Formwork line and level including new kicker, if appropriate							
6		Grout checks fixed and level							
7		Precautions taken, where necessary, to prevent uplift							
8		Ties correct diameter and position							
9		All wedges driven tight							
10		Joints grout tight							
11		Special joints and water bars are as detailed							
12		Stop ends fixed							
13		Position of all box outs and built in items. These should be securely fixed							
14		Final check of formwork line and level undertaken prior to concrete placement							
Work compl	eted by (Sub	contractor Na	me / Sign):				Date:		
Work Inspected by (Proline Name/ Sign):							Date:		
Work Inspected (if required) by (Client Name/ Sign):							Re-inspection Required Yes No		
Issues to be rectified before re-inspection: Proposed Date:									
For Proline u			circle reasor	for quality deviation					
Work sequence	Ма	iterials	Lack of care	Workmanship/ Sk	tills	Poor design detailing	Inadequate supervision	Poor Produ	Other
Feedback: It	ems that beca	ame apparent d	luring inspect	ion that should be co	onside	red in future proce	ess:		