SCAFFFOLD PRE-USE AND WEEKLY INSPECTION SHEET

Competent Worker must complete checklist weekly

Worker Name: _____ **Contractor:** _____

Project: _____ **Project #:** _____

Location: _____ **Month:**

Date										
Initials										
General	OK	N/A	OK	N/A	OK	N/A	OK	N/A	OK	N/A
Competent Erector										
Engineered Drawings										
Inspection Tag										
Height to Width Ratio										
Frame Rust or Damage										
Components Compatible										
Plumb & Square										
Mud Sills										
Base Plates Supported										
Levelling Screws(1' or less)										
Connections Secured										
Scaffold Secured(Intervals)										
Bracing (Vertical)										
Bracing (Horizontal)										
Fully Planked										
Plank Overlap Secured										
All planks 18" min. wide										
Cleats Secured										
Wood Condition										
Platforms clear of debris										
Uplift Secured										
Outriggers Correct Size										
Outriggers Secured										
Guard/Mid/Toe Rails										
Ladders Secure										
Ladders Height										
Safety Cage (if vertical over 3m)										
Stairs										
Lighting										
Wheel Brakes										
Workers Fall Protection										
Protection from Vehicles										
Material & Tool Hoisting System										
Signage										
Power Line Protection										
Comments:										