

# Roofing Installation Quality Control Checklist

Project Name: \_\_\_\_\_  
Location: \_\_\_\_\_  
Date: \_\_\_\_\_  
Inspected by: \_\_\_\_\_

## 1. Pre-Installation

Item	Yes	No	Comments
All materials delivered & in good condition			
Weather conditions suitable for installation			
Existing roof/deck inspected & cleaned			

## 2. Installation

Item	Yes	No	Comments
Underlayment properly installed			
Flashing installed at all transitions/penetrations			
Shingles/tiles/panels installed as per manufacturer specs			
Fasteners of correct type & spacing			
Valleys, ridges, & hips properly treated			

## 3. Post-Installation

Item	Yes	No	Comments
Site cleaned up, all debris removed			
Final inspection carried out			
Warranty and documentation provided			

## Notes

\_\_\_\_\_  
Installer Signature

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Inspector Signature