

New Home Construction Handover Report

Project Details

Project Name:

Site Address:

Client Name:

Contractor Name:

Date of Handover:

Inspector:

Checklist

Item	Inspected	Comments
Exterior Structure	<input type="checkbox"/>	<hr/>
Roofing	<input type="checkbox"/>	<hr/>
Windows & Doors	<input type="checkbox"/>	<hr/>
Plumbing	<input type="checkbox"/>	<hr/>
Electrical	<input type="checkbox"/>	<hr/>
Flooring	<input type="checkbox"/>	<hr/>
Walls & Paint	<input type="checkbox"/>	<hr/>
Kitchen	<input type="checkbox"/>	<hr/>
Bathroom(s)	<input type="checkbox"/>	<hr/>
Heating/Cooling	<input type="checkbox"/>	<hr/>

Outstanding Items / Defects

List any outstanding items, defects, or further actions required

General Comments

General remarks about the project, handover, or special conditions

Client Signature & Date

Contractor Signature & Date