

Interior Wall Deficiency Punch List

Project: _____

Date: _____

Inspector: _____

Punch List Details

No.	Location	Deficiency	Suggested Action	Status
1	Living Room, North Wall	Paint chipped and minor cracks near outlet	Patch and repaint	Incomplete
2	Bedroom 2, East Wall	Nail holes visible	Fill and touch up	Incomplete
3	Hallway, South Wall	Scuff marks near baseboard	Clean and repaint	Incomplete
4	Kitchen, Above backsplash	Uneven drywall finish	Sand and refinish	Incomplete
5	Master Bath, West Wall	Water stain below window	Investigate, repair & repaint	Incomplete

Remarks

Signature: _____

Date: _____