

Scaffold Safety Inspection Report

General Information

Date

Project / Site

Site name or description

Inspector Name

Full Name

Location

e.g. Building, floor

Type of Scaffold

e.g. Supported, Suspended

Weather Conditions

e.g. Clear, Rainy

Inspection Checklist

Item	Yes	No	N/A	Comments
Base properly supported	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Planks and decking secure and in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Guardrails, midrails, and toeboards installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Access ladders/stairs provided and secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
No visible damage, corrosion, or missing parts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Proper tie-ins or bracing in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Area around scaffold is clear and safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Comments / Actions Required

Describe any issues found or corrective actions needed

Inspector Signature

Name

Date

