

Scaffold Safety Inspection Report

Date: _____ Time: _____
Project Name: _____ Location: _____
Inspector: _____ Weather Conditions: _____

SCAFFOLD DETAILS

Type of Scaffold	_____	Height (m)	_____
Width (m)	_____	Number of Levels	_____
Last Modification Date	_____	Tag Status	_____

INSPECTION CHECKLIST

Item	Yes	No	Comments
Properly erected on stable ground			
Guardrails and toe boards in place			
All planking secured and in good condition			
Access ladders/stairs provided			
All bracing installed correctly			
No visible damage/corrosion to components			
Scaffold clear of debris/materials			
Loads within safe capacity			
Tag displayed and up-to-date			

FINDINGS / ACTIONS REQUIRED

FURTHER RECOMMENDATIONS

Inspector's Name: _____
Signature: _____
Date: _____
Supervisor's Name: _____
Signature: _____
Date: _____

