Construction Lighting Tower Safety Inspection

Tower ID/Unit: _____

Location: _____

Inspection Date: _____

Technician Name: _____

Supervisor Name: _____

No.	Inspection Item	Status	Remark
1	Pre-Start Inspection - Checkpoint 1	OK / FAIL / NA	
2	Pre-Start Inspection - Checkpoint 2	OK / FAIL / NA	
3	Pre-Start Inspection - Checkpoint 3	OK / FAIL / NA	
4	Pre-Start Inspection - Checkpoint 4	OK / FAIL / NA	
5	Pre-Start Inspection - Checkpoint 5	OK / FAIL / NA	
6	Mast & Winch System - Checkpoint 1	OK / FAIL / NA	
7	Mast & Winch System - Checkpoint 2	OK / FAIL / NA	
8	Mast & Winch System - Checkpoint 3	OK / FAIL / NA	
9	Mast & Winch System - Checkpoint 4	OK / FAIL / NA	
10	Mast & Winch System - Checkpoint 5	OK / FAIL / NA	
11	Light Fixtures & Bulbs - Checkpoint 1	OK / FAIL / NA	
12	Light Fixtures & Bulbs - Checkpoint 2	OK / FAIL / NA	
13	Light Fixtures & Bulbs - Checkpoint 3	OK / FAIL / NA	
14	Light Fixtures & Bulbs - Checkpoint 4	OK / FAIL / NA	
15	Light Fixtures & Bulbs - Checkpoint 5	OK / FAIL / NA	
16	Stabilizers & Outriggers - Checkpoint 1	OK / FAIL / NA	
17	Stabilizers & Outriggers - Checkpoint 2	OK / FAIL / NA	
18	Stabilizers & Outriggers - Checkpoint 3	OK / FAIL / NA	
19	Stabilizers & Outriggers - Checkpoint 4	OK / FAIL / NA	
20	Stabilizers & Outriggers - Checkpoint 5	OK / FAIL / NA	

Inspector Signature: _____ Barcode: _____