

Contractor NCR Checklist

Construction

CLIENT DETAILS

Name of client

Email address

Contact number

Day work sheet number

Day ending

Work description

Name of labour

Trade

Total hours

Rate

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

CONTRACTOR DETAILS

Name

GENERAL

Is relevant paperwork available?

☐ Yes ☐ No ☐ Na

Is correct material available?

☐ Yes ☐ No ☐ Na

Is the job information available by the supervisor?

☐ Yes ☐ No ☐ Na

Is the material of optimum quality?

☐ Yes ☐ No ☐ Na

Are correct tools and equipment available?

☐ Yes☐ No☐ Na

Is site-specific PPE being used?

☐ Yes☐ No☐ Na

Is there a sufficient time frame allotted to tasks?

☐ Yes☐ No☐ Na

Are all required documents been signed on?

☐ Yes☐ No☐ Na

Are tasks being carried out as per RAMS?

☐ Yes☐ No☐ Na

Is housekeeping good?

☐ Yes☐ No☐ Na

Is the quality of installation acceptable?

☐ Yes☐ No☐ Na

Has the asbestos report been referred to before commencement of work?

☐ Yes☐ No☐ Na

Are test results recorded?

☐ Yes☐ No☐ Na

Are pictures recorded for office use?

Yes

No

Na

Is a helper available?

Yes

No

Na

Is the worker able to carry out required tasks?

Yes

No

Na

Is the helper aware of safety standards?

Yes

No

Na

Is general development acceptable?

Yes

No

Na

Is housekeeping good?

Yes

No

Na

Is behavior on-site acceptable?

Yes

No

Na

Signature

SIGNATURE

MATERIAL

Units

Quantity

Price

Total cost of material

PLANT AND OTHER ITEMS

Type of plant

Hours hired

Rate

Total cost of hire

Date

Issued by

Issued to

Name of contractor

Date

DATE

2017-01-01