BUILDING INSPECTION CHECKLIST

Building Name:……………………………………………………………….…..

Location/ Address:……….……………………………………………………………

Building Use: Committee of Management (Community)

Inspection to assess risks for fire, theft, burglary, vandalism and water damage on each site

Inspection Criteria	Yes / No	Conditions Good (G), Satisfactory (S), Unsatisfactory (US) Please provide additional comments where necessary
1. Fire risk internal (electrical wiring, gas equipment, combustible materials)	☐ ☐	
2. Fire Risk External (external protection measures, eg removal of grass, litter, combustibles)	☐ ☐	
3. Burglary/ Theft (locks on all doors, window locks, items of value in a secure place)	☐ ☐	
4. Access paths and conditions of areas people are invited to use facilities (e.g. BBQ, toilets)	☐ ☐	
5. Is pedestrian access appropriate ramps and stairs	☐ ☐	
6. If access to public should be restricted.	☐ ☐	
7. Check paths leading to entrance of building and condition of other outdoor locations people are encouraged to use (eg BBQ areas, car parks, seating.)	☐ ☐	
8. Access to the entrance safe, clear of hazards and are easy to open.	☐ ☐	

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9. If access to public should be restricted - are fencing, gates etc, secure.	☐ ☐	
10. What surrounds the property (major roads, schools, pedestrian areas)? Assess the danger.	☐ ☐	
11. Conditions of the floor surface (slip free, free of protrusions, holes, general wear and tear) change in levels, delineation.	☐ ☐	
12. Objects/ furniture causing nuisance or blocking in public area. Check for objects within grasp of children that could cause injury.	☐ ☐	
13. Condition or damage to furniture.	☐ ☐	
14. Entrance/Exits easy to access (clear glass visible or marked by safety tape, door easy to open).	☐ ☐	
15. Is there an emergency evacuation plan for the building and does this include the public.	☐ ☐	
16. Extension and phone cords trailing leads.	☐ ☐	
17. Conditions of public toilets.	☐ ☐	
18. Ceiling free of leaks.	☐ ☐	

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Inspection Criteria	Yes / No	Conditions Good (G), Satisfactory (S), Unsatisfactory (US) Please provide additional comments where necessary
19. Cleaning of spills.	☐ ☐	
20. Chemical storage (are chemicals stored safely)	☐ ☐	
21. No exposed heaters/hot water pipes that could cause problems to children.	☐ ☐	
Incidents:		
22. Incident/Hazard Book No.	☐ ☐	
23. No. of reports circulated since last inspection	☐ ☐	
Security: Burglary/Theft/Vandalism/Other		
24. Concealed areas on approach/in grounds? Are there any areas that could conceal a person on approach to entry (poor lighting, shrubs etc)	☐ ☐	
25. Evidence of graffiti?	☐ ☐	
26. Internal security (bars/alarms/grilles/etc) adequate?	☐ ☐	
27. Roof access (removing tiles etc) adequate?	☐ ☐	

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Inspection Criteria	Yes / No	Conditions Good (G), Satisfactory (S), Unsatisfactory (US) Please provide additional comments where necessary
Trees:		
28. Overhanging causing gutter blockage etc.?	☐ ☐	
29. Old or appears sick and needs expert appraisal?	☐ ☐	
30. Foliage in or too close to power lines?	☐ ☐	
Other Notes:		

Inspection By:………………..……………….   **Date:**………………………………..

Office Use Only		
File No.	TRIM Reference No.	Building No: