



Wall Covering Quality Conformance Inspection Checklist

Project: _____
 Area: _____
 Date: _____ Temp: _____
 Inspector: _____

<u>General</u>	<u>Yes</u>	<u>No</u>
1 Has the taping been inspected and all deficiencies corrected?	<input type="checkbox"/>	<input type="checkbox"/>
2 Has Raymond's safety representative visited the site?	<input type="checkbox"/>	<input type="checkbox"/>
3 Has the scaffold needed for our work been inspected for safety? a. Does the scaffold have a green card tagged to it?	<input type="checkbox"/>	<input type="checkbox"/>
4 Is the material stocked on dunnage to prevent damages? a. If required, is the material wrapped in plastic for temporary protection?	<input type="checkbox"/>	<input type="checkbox"/>
5 Does the General Contractor agree the wall is ready for wall-covering? a. Has the GC provided a written directive to apply wall-covering to the walls?	<input type="checkbox"/>	<input type="checkbox"/>
6 Is there adequate ventilation, lighting, and temperature conditions?	<input type="checkbox"/>	<input type="checkbox"/>

<u>Preparation</u>	<u>Yes</u>	<u>No</u>
7 Are the wall surfaces smooth, clean, dry, structurally sound, and free of mildew grease, dust, and other stains?	<input type="checkbox"/>	<input type="checkbox"/>
8 Have the wall surfaces been primed according to manufacturer's printed instructions?	<input type="checkbox"/>	<input type="checkbox"/>
9 Have wall surfaces with significant color variations been primed with a quality pigmented wall-covering primer?	<input type="checkbox"/>	<input type="checkbox"/>
10 Is the moisture content of the surface within the limits recommended by the manufacturer?	<input type="checkbox"/>	<input type="checkbox"/>

<u>Wall Covering Inspection</u>	<u>Yes</u>	<u>No</u>
11 Have manufacturer's written instructions been followed completely during installation?	<input type="checkbox"/>	<input type="checkbox"/>
12 Have wall-covering panels been installed by roll numbers?	<input type="checkbox"/>	<input type="checkbox"/>
13 Have run numbers been changed at partition breaks and corners only?	<input type="checkbox"/>	<input type="checkbox"/>
14 Are there any gaps or overlaps?	<input type="checkbox"/>	<input type="checkbox"/>
15 Have patterns and shading variations been matched?	<input type="checkbox"/>	<input type="checkbox"/>
16 Have seams been installed plumb, at least 6" from outside corners, and 3" from inside	<input type="checkbox"/>	<input type="checkbox"/>
17 Are there any horizontal seams?	<input type="checkbox"/>	<input type="checkbox"/>
18 Have air bubbles, wrinkles, blisters and other defects been removed?	<input type="checkbox"/>	<input type="checkbox"/>
19 Have edges been trimmed for color uniformity, pattern match, and tight closure at seams /	<input type="checkbox"/>	<input type="checkbox"/>
20 Are seams butted?	<input type="checkbox"/>	<input type="checkbox"/>
21 Has excess adhesive at finished seams, perimeter edges, and adjacent surfaces been removed?	<input type="checkbox"/>	<input type="checkbox"/>

<u>Notes</u>	
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