NYC Department of Buildings Construction Superintendent (CS) Inspection Log   Date:___/___/___

Project Name:	Project Location:
Superintendent Name:	Superintendent Signature:
Arrival Time:	Departure Time:

Note General Progress of the Work Site / Summary of the Day's Work Activities:

Note Superintendent's Activities at the Site / Areas and Floors Inspected:

❐ Verify work is being conducted in accordance with sound construction/demolition processes.
❐ Verify compliance with the approved construction documents.
❐ Verify compliance with Chapter 33 of the Building Code and any rules promulgated thereunder.

Note any Pre Task Plan Meetings: (List Contractor(s) and scope of work)	Note any General Safety Orientations: (List Contractor(s) attending)
❐ Any conditions required to notify DOB?: ❐YES ❐NO **(If YES, Include separate documentation)**	❐ DOB Notification Sent if required?:
❐ Accident Reported to DOB?: ❐YES ❐NO **(If YES, Include separate documentation)**	❐ Damage to Adjoining Property Caused by Construction or Demolition?:
Designated Competent Person: ❐ N/A: Construction Superintendent on site at all times	Competent Person Signature:

Unsafe Condition Noted: (Include area/floor and time)	Notification Sent To:	Condition Corrected Order: (Include name of individual ordered to correct; refusal to do so; follow up by CS; where violation corrected; nature of correction)	Registered Design Professional or Special Inspection Agency Notified:
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

Note Violations, Stop Work Orders, or Summonses Issued by the DOB (include date issued and date listed or dismissed)

☐ N/A

This Construction Superintendent Inspection Log complies with the NYC Department of Buildings Service Update of August 2016 and 1RCNY§3301-02/ Chapter 33.
Effective December, 2016