



Scaffold Inspection Record

Initial Inspection

Weekly Inspection

Alteration or adverse event inspection

Name and address for whom
inspection was carried out (hirer/user)

Construction site address

Purpose for which scaffold is erected

Description of scaffold and its location on site

Date and time of scaffold inspection

Details of any matter identified that could give rise to a risk of health and safety of any person(s)

Can the scaffold continue to be used safely?

Yes

No

If NO have the relevant users/hirer been notified

Yes

No

Name(s) of those notified

Details of actions or further actions necessary as result of defect(s)
identified above

Competent person carrying out inspection

Contact details including phone number