



# PUNCH LIST

Project: \_\_\_\_\_

From (A/E): \_\_\_\_\_

\_\_\_\_\_

Site Visit Date: \_\_\_\_\_

To (Contractor): \_\_\_\_\_

A/E Project Number: \_\_\_\_\_

\_\_\_\_\_

Contract For: \_\_\_\_\_

The following items require the attention of the Contractor for completion or correction. This list may not be all-inclusive, and the failure to include any items on this list does not alter the responsibility of the Contractor to complete all Work in accordance with the Contract Documents.

Item Number	Room Number	Location (Area)	Description	Correction/Completion Date	Verification A/E Check
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Attachments

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_

Copies:  Owner  Consultants  \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_  \_\_\_\_\_  File