

CCS Checklist

Job Address: _____

Client: _____

Roofer: _____

Consultant: _____

Name: _____

Name: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

CEILING
CONTAINMENT

DEBRIS
NETTING

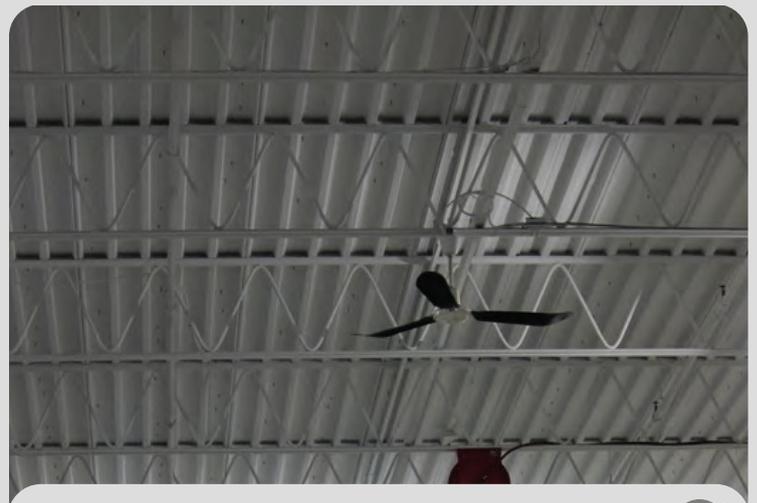
FALL
ARREST

LEAK
DIVERSION

PLEASE TAKE SEVERAL ZOOMED OUT PICTURES OF ALL DIFFERENT USE AREAS



How to take pictures: Floor & Ceiling Visible



How NOT to take pictures: Only Ceiling Visible

Total Area Requiring Containment: _____ SF

In case of isolated areas, please note location(s) and measurements below

Safety Orientation: 1ST VISIT DAILY

Security Clearance: YES NO

Are there any known or suspected asbestos, mold, or other hazardous materials present within the project area requiring containment? YES NO

Roof Plan Sketch & Measurements / Notes:

Deck Height (Floor): _____

Deck Height (Mezzanine): _____ N/A

Lifts Needed To Reach All Areas :

SCISSOR BOOM LADDERS

Lift Delivery: DOCK DRIVE-IN

Nusens Installation & Dismantle Hours:

REGULAR OVERNIGHT WEEKEND ONLY



DOWNLOAD THIS
CHECKLIST

I have reviewed the information above and believe it to be accurate

Name: _____

Date: _____

Signature: _____