

**JOBSITE NAME/ADDRESS:**

**COMPANY NAME:**



## **BUILDING | REMODELING QUALITY CONTROL CHECKLIST**

Please review this list and check mark each item to confirm completion.  
Mark N/A if it was not part of your specs or was not needed for this project.

### **Painting, Staining, Wall Coverings: Painter**

- | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <b>N/A</b> |  |
|-------------------------------------|--------------------------|------------|--|
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check manufacturer, type, color per specs/print  |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check paint or stain color per specs and document any changes with the homeowner   |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Document any changes with homeowner  |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check proper preparation to surface to be painted or stained . Primer or paint applied verifies meets quality standards.<br>1.) Nail holes filled so finish product flush with wood.<br>2.) All knot holes, pitch pockets sealed appropriately<br>3.) Cracks and defects filled to finish surface<br>4.) Drywall imperfections smoothed and textured<br>5.) Primer/sealer used where possible<br>6.) Protected areas to be "Taped & Bagged"<br>7.) Floors continue to be covered with building paper |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check color intersections are distinct and clean creating true and correct lines (sharp cut-lines)   |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check windows, doors, trim free of paint/stain   |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check extra paint/stain remains with owner and label the cans  |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check paint changes at spring lines to be straight   |
| <input type="checkbox"/>            | <input type="checkbox"/> |            | Check with homeowner if skim coating the existing walls is necessary   |

### **Wall Coverings: Painter**

- |                          |                          |  |   |
|--------------------------|--------------------------|--|---|
| <input type="checkbox"/> | <input type="checkbox"/> |  | Check for wall coverings located in specified areas                         |
| <input type="checkbox"/> | <input type="checkbox"/> |  | Size walls where necessary  |
| <input type="checkbox"/> | <input type="checkbox"/> |  | Where wallpaper has been removed , patch wall so flush and size as required |

**Notes:**

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