

Electrical Material Inspection Form

Space Name	
Space Number	
Date	---- / ---- / 20--
Discipline	ELECTRICAL WORKS

Material

PVC and Galvanized Steel Conduits	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
	Comments:
Cables and Wires	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
	Comments:
Wiring Accessories Including Lighting Switches, Sockets, Floor Boxes Disconnecting and load break switches...etc.	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
	Comments:

Electrical Panels	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
	Comments:

Light Fittings	<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
	Comments:

SIGNATURES

Inspected By

Signature

Date ---- / ---- / 20--