

Inspectable Construction Materials Checklist

Organization Name:

Project Name:

Contents

A. Foundation Materials	2
B. Masonry	2
C. Tools and Fasteners	2
D. Metal Items.....	3
E. Carpentry and Furniture.....	3
F. Thermal Moisture Protection	3
G. Doors and Windows (excluding locks)	4
H. Finishes	4
I. Plumbing and Mechanical Systems	4
J. Electrical Items	5
K. Other Miscellaneous	5

All items listed as “inspectable” may be procured locally using allotted random procurement percentages. All items that are “non-inspectable” must be procured in the US and securely shipped to the construction site.

A. Foundation Materials

* Note:

1. Aggregate cement, sand and gravel should be poured through an appropriate sized mesh, and a magnet should be utilized to occasionally check for inappropriate metallic particles.
2. At least 10% of the rebar should be examined for internal voids using ultrasonic testing. If the ultrasonic tester is unavailable, then destructive testing may be used.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Water	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Sand	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Cement	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Aggregate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Gravel	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Rebar	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Rebar ties & mesh	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

B. Masonry

*Note:

1. Precast is not acceptable if created off site unless constructed in the US and shipped secure. If a CST inspects the precast as it is made, it is acceptable.
2. Stonework for the façade needs only visual inspection. Internal stone work must undergo a 3% random destruction test.
3. Scaffolding should be inspected internally before allowed on site.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Cement blocks & brick	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Precast concrete	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Stone Work	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Forms	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Scaffolding/work platforms	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

C. Tools and Fasteners

* Note:

Personal tool boxes will be examined when first brought on site, and randomly thereafter. They will be locked on the site when not in use and workers will not be allowed to carry them on and off the site.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Tool boxes	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Welding rod & solder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Fasteners	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Hilti fasteners & charges	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

D. Metal Items

*Note:

Visual inspection applies only to common, commercially available items. Items requiring special fabrication are not inspectable unless CST is present during fabrication.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Structural Steel	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Metal Decking	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Metal Fabrications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Metal Stairs	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

E. Carpentry and Furniture

*Note:

1. Finished and rough carpentry items constructed on site will be monitored by CSTs.
2. Furniture having built in electrical devices or lamps must be disassembled and inspected separately

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Lumber	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Rough & finished carpentry	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Furniture w/out electrical raceway	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

F. Thermal Moisture Protection

*Note:

Metallic membranes preferred as they offer some degree of RF attenuation.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Water-proof membrane	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Water-proof membrane (Metallic)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Bituminous water proofing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Thermal Insulation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Spray on Fire Proofing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

G. Doors and Windows (excluding locks)

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Metal Doors/Frames	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Wood Doors/Frames	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Metal Windows/Frames	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Wood Windows/Frames	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Vault Doors/Frames	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Glazing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

H. Finishes

* Note:

Bundles of tiles will be unpacked and no more than two tiles at a time will be examined.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Plaster Lath	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Plaster	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Gypsum Wallboard	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Raised Flooring	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Carpet and Curtains	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Paint Varnishes	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Adhesives	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Wall Coverings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Ceramic Tile	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Acoustical Tile	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

I. Plumbing and Mechanical Systems

* Note:

Can be inspected if no tape, insulation and/or other finishes have been used.

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Plumbing (Metal)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Plumbing (plastic)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Plumbing fixtures	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Valves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Fan Coil Units	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Site Fabricated Ducts	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Prefabricated Ducts	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

J. Electrical Items

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Wire	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Conduit	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Junction boxes	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Outlets w/out built ins	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Outlets w/built ins	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Switches, Breakers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Incandescent light fixtures	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Florescent light fixtures	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Light bulbs (tubes)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Circuit breaker boards	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Electrical component boards	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Transformers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Transient suppressor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Voltage regulators	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Generators	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Power line conditioners	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Switch gears	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Telephone systems	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test

K. Other Miscellaneous

DESCRIPTION	INSPECTABLE	INSPECTION METHOD				
Chalk & tack boards	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Fire extinguishers	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Fire alarm systems	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Fire alarm sensors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Sprinkler/gas heads	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Kitchen appliances	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Electrical dark room equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Security alarm systems	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Acoustical insulation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test
Locks	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> X-Ray	<input type="checkbox"/> Ultrasonic	<input type="checkbox"/> Visual	<input type="checkbox"/> Metal Detector	<input type="checkbox"/> Destructive Test