



Checklist for use in inspections prior to occupation

Project name: _____ Safety area(s): _____

Project type: New building: _____ Alteration: _____ Rehabilitation: _____ Rented: _____

Date of: inspection: _____ moving in: _____ repairs according to checklist: _____

Checkpoints:	YES/NO	Remark (location)
Has a certificate of completion been issued?		
Has permit for use been issued?		
Have takeover proceedings been conducted?*		
Have the buildings/furnishings been adequately adapted for all user groups (including visually, hearing and mobility impaired)?		
Has testing and balancing of the ventilation system been completed?		
Has the ventilation system been roughly tested and balanced?		
Has the access route been cleared?		
Has the lift/have the lifts been approved and commissioned?		
Have the escape routes been cleared?		
Are the furnishings in place?		
Staff rooms (toilets, break rooms, cloakrooms): Are wastepaper baskets, toilet paper, paper towels etc. in place?		
Has the building been cleaned and have the floors been polished?		
Has regular cleaning been ordered?		
Have an owner's representative and a fire safety representative been appointed for the building?		
Have cooperation between the maintenance staff and new users of the building been established?		
Other:		

Conclusion:

Moving in recommended: _____ Moving in not recommended: _____
Recommended on the following condition(s):

User: _____ (sign.) HSE section: _____ (sign.)

* Liability passes from contractor to client if the premises are moved into before the takeover proceedings have been conducted. In other words, the client loses rights.