



SSPC USE ONLY
Date Verified: _____
Staff Verified: _____

SSPC CERTIFIED INSPECTOR PERFORMANCE EVALUATION FORM

BCI Inspector's Name _____ Company _____

Project No. _____ Dates on Site _____ through _____

Name of Evaluator _____

Owner/Representative on Job _____

Please evaluate the inspector for your project only:

I. Safety	
<ul style="list-style-type: none"> Inspector meets safety requirements of OSHA or other agencies and has good safety practices without constant owner reminder 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____
II. Quality of Work/Service	
<ul style="list-style-type: none"> Inspector enforced quality/service requirements of the specs and ensures good painting practices occur without constant reminder by the owner. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector has deliberately allowed violations of the specification requirements. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector's work is of poor quality. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector communicates with owner when necessary. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector meets overall inspection schedule and has necessary equipment to perform the work. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector's work requires supervision to ensure acceptable performance is occurring. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____
<ul style="list-style-type: none"> Inspector has documentation that supports the performance of the contractor. 	Yes <input type="checkbox"/> No <input type="checkbox"/> Usually <input type="checkbox"/> Usually Not <input type="checkbox"/> Describe: _____ _____

