INSTALLATION OF INTERIOR LIGHTING Project: IR No.: Building No.: Owner: Project Manager: Level: Consultant: Date: Main Contractor: **CHECKED BY** NO. **DESCRIPTION** REMARKS 1 Approved materials are used (MIR) 2 Shopdrawing is approved 3 Cables pulled are approved and tested Correct type of lighting fixtures are installed 4 5 Cables are properly terminated to lighting fixtures Lighting fixtures installed are in correct location as per 6 approved drawing Installed fittings are aligned and levelled in straight 7 Installe fittings are properly supported 8 Installed fittings are clean, free of damages and 9 scratches. 10 Label/Tagging is provided Remarks/Comments (if any): **COMPANY** Name Position

Signature Date