|  |
| --- |
| **END OF DEFECTS LIABILITY CHECKLIST** |
| Workplace |  |
| Date of review  |  |

**Details of the Building and Construction Project**

|  |  |
| --- | --- |
| Name of building and construction project |  |
| Overview of this project |  |
| Project site address |  |
| State/territory |  |
| **Checklist items:** | **YES/NO** | **Remedy** |
|  | o YES o NO |  |
|  | o YES o NO |  |