Professional Inspection Cover Sheet

This form should be filled out for every Professional Inspection your company performs. This may include your Annual (Semi-Annual) Professional Inspection, Acceptance Inspection, and/or Major Modification Acceptance Inspection done within the last 12 months.

# Inspection Summary

Date(s) of Inspection: Click or tap here to enter text.

Course Name: Click or tap here to enter text.

Owner/Operator: Click or tap here to enter text.

Course Address: Click or tap here to enter text.

Contact Person: Click or tap here to enter text.

Per the Inspection requirements for this program, a physical inspection of the site must be performed by an ACCT PVM inspector, an ACCT certified Professional Inspector, or a licensed professional engineer.

I am a(n)

ACCT PVM Inspector

ACCT Certified Professional Inspector

Licensed Professional Engineer

Inspection Company: Click or tap here to enter text.

Inspector(s) Name and one of the following: ACCT PVM Member Number, ACCT ICE Certification Number, Engineer License Number:

Click or tap here to enter text.

Click or tap here to enter text.

Click or tap here to enter text.

Contact Information for Inspection Company:

Contact Name: Click or tap here to enter text.

Contact Phone Number: Click or tap here to enter text.

Time spent on-site: Click or tap here to enter text.

# Report Summary and Recommendations

*Provide a complete list of elements and equipment that failed the inspection. Use the menu to indicate the reason for failure. Fill in the cell with the recommendation to return to service.*

**FAIL:** not suitable for participant use AT THIS TIME

***Elements***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Element Name (location) | Reason for Failure | Recommendation for return to service |
|  | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
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***Element Failure Menu Definition***

|  |  |  |
| --- | --- | --- |
| Material damage/Degradation |  | Advanced rust or corrosion, broken wires, rot, structural woodpecker holes, a tree is dead, etc. |
| Compromised function |  | It is not working the way it's supposed to -- includes tree growth, corridor width, etc. |
| Standards non-compliance |  | The standard to which the course is being inspected does not allow it |
| Regulatory non-compliance |  | The law in the jurisdiction does not allow it |
| OEM non-compliance |  | It's not being used the way the manufacturer outlines |

***Equipment***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Equipment Item | Reason for Failure | Recommendation for return to service |
|  | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
|  | Click or tap here to enter text. | Choose an item. | Click or tap here to enter text. |
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***Equipment Failure Menu Definition***

|  |  |  |
| --- | --- | --- |
| Material damage/Degradation |  | UV damage, chewed by mice, grooved, worn, core poking thru, too mushy, too hard, etc. |
| Compromised function |  | It does not close, does not open, does not hold, does not release, etc. |
| Exceeds service timeline |  | Exceeds OEM service window -- the sticker is out of date |
| Manufacturer recall |  | It was manufactured wrong, there was a notice |
| Regulatory non-compliance |  | The law in the jurisdiction does not allow it |
| OEM non-compliance |  | It's not being used the way the manufacturer outlines |

***DPI Standard Document Requirement***

|  |  |  |
| --- | --- | --- |
| Document | Response | Notes |
| **INSPECTION REPORT REQUIREMENTS: If you are filling this out for a Professional Inspection, please affirm below that these items are included in this report. Respond with Yes or No. If you have notes, please add in the notes section**  **An ACCT compliant inspection report must contain the following items. Please affirm below that these items are included in this report.** | Choose an item. | Click or tap here to enter text. |
| * Inspection Date | Choose an item. | Click or tap here to enter text. |
| * Inspection company and inspector (s) names | Choose an item. | Click or tap here to enter text. |
| * Course installation history if available including the original installation dates and manufacturer and entity name, details of subsequent modifications and additions | Choose an item. | Click or tap here to enter text. |
| * Previous inspection information | Choose an item. | Click or tap here to enter text. |
| * List of elements inspected | Choose an item. | Click or tap here to enter text. |
| * List of elements not inspected and reason for the omission | Choose an item. | Click or tap here to enter text. |
| * Condition of each element | Choose an item. | Click or tap here to enter text. |
| * Concerns warranting continued observation | Choose an item. | Click or tap here to enter text. |
| * List of life safety system equipment inspected | Choose an item. | Click or tap here to enter text. |
|  |  |  |
| **ACCEPTANCE INSPECTION REQUIREMENTS: If you are filling this out for an Acceptance Inspection, please check for evidence and respond with Yes or No. If you have notes, please add in the notes section**  **Original if 2012 or Newer and shows evidence of the information listed below.** | Choose an item. | Click or tap here to enter text. |
| * Operating parameters and limitations | Choose an item. | Click or tap here to enter text. |
| * Operational instructions and participant safety procedures | Choose an item. | Click or tap here to enter text. |
| * Recommended rescue/assist procedures | Choose an item. | Click or tap here to enter text. |
| * Maintenance, inspection and equipment replacement criteria | Choose an item. | Click or tap here to enter text. |
| * Identification of critical components and systems | Choose an item. | Click or tap here to enter text. |
| * For Zip Lines – brake system operational limits and anticipated hazards | Choose an item. | Click or tap here to enter text. |
| * Other jurisdictional Requirements (note specifics) | Choose an item. | Click or tap here to enter text. |
|  |  |  |
| **Major** **Modification Acceptance** **Inspection**: **If you are filling this out for a Major Modification Acceptance Inspection, please check for evidence and respond with a Yes or No. If you have notes, please add in the Notes section**  **Documents show evidence of the following.** | Choose an item. | Click or tap here to enter text. |
| * Commissioning Documents | Choose an item. | Click or tap here to enter text. |
| * Load Testing | Choose an item. | Click or tap here to enter text. |
| * Arborist Report | Choose an item. | Click or tap here to enter text. |
| * Geotechnical Report | Choose an item. | Click or tap here to enter text. |
| * Site Plan | Choose an item. | Click or tap here to enter text. |
| * Engineering documents and calculations | Choose an item. | Click or tap here to enter text. |
|  |  |  |
| **Visual and Physical** **Evaluation completed**  -Please Respond with Yes or No. If you have notes, please add in the notes section | Choose an item. | Click or tap here to enter text. |
|  |  |  |

Please print and fill out the following in Blue or Black ink.

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, attest that all of the documentation, equipment and elements listed on this form were observed at the client’s site during the inspection listed above.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_