

**DANGER
DO NOT USE
SCAFFOLD**

**UNDER
CONSTRUCTION**

Name: _____

Date: _____



CAUTION
100% FALL PROTECTION
REQUIRED BY USER(S) AT ALL
TIMES

SCAFFOLDING MUST BE
INSPECTED DAILY BEFORE EACH
USE
(SEE BACK OF TAG)

Inspected By: _____
Date: _____ Time: _____

NO MODIFICATIONS MUST BE MADE TO
SCAFFOLD WITHOUT PRIOR APPROVAL



SCAFFOLDING MUST BE
INSPECTED DAILY BEFORE EACH
USE

JAN-FEB-MAR-APR-MAY-JUN
JUL-AUG-SEP-OCT-NOV-DEC

| | | | |
|----|----|----|----|
| 1 | 2 | 3 | 4 |
| 5 | 6 | 7 | 8 |
| 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 |
| 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 |
| 29 | 30 | 31 | |



**OK TO USE
SCAFFOLD IS 100%
COMPLETE**

**SCAFFOLDING MUST
BE INSPECTED DAILY
BEFORE EACH USE
(SEE BACK OF TAG)**

Inspected by, _____

Date: _____ Time: _____

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SCAFFOLD
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