

CAMPSITE INSPECTION

Troop _____ Campsite _____ Week _____

Inspection Ratings:

- 5 - Excellent
- 4 - Good
- 3 - Satisfactory
- 2 - Poor
- 1 - Health or Safety Hazard
- 0 - Not completed or done

INSPECTION ITEM	Mo	Tue	We	Thu	Fr	Notes and comments
General Site Site free of litter Natural groundcover in place Troop Identified						
Tents & Living Areas Properly erected Properly rolled (weather permitting) Tents litter free Properly erected & used clothesline						
Latrine/Washbasin Clean & Stocked with toilet paper Toilet lids down Washbasin clean Washbasin free of personal gear						
Safety Large fire barrel filled and covered Fireguard plan posted & USED Ample Fire buckets around fire barrel						
Miscellaneous Troop duty rosters posted Camper's schedules posted Personal gear all properly stored Roads & trails to campsite litter free Campsite improvements/gadgets daily Patrol Method demonstrated (Patrol flags etc evident)						
Daily Totals						
Week's Average						
Commissioner's Initials						

OTHER NOTES AND COMMENTS

Commissioner's Signature _____