

Architecture Model Checklist

Project Name _____
 Project Number _____
 Checked By _____

BIM Model Checked _____
 Date _____
 Verified By _____

S.No	Checkpoints	Response			Remarks
GENERAL					
1.1	Project Basepoint and Survey point marked as per the Input?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.2	Are all the required levels and Grids drawn as per the Input Cad drawing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
1.3	Are model names and standards in BEP followed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
POINTS TO BE CHECKED IN MODEL					
2.1	Is Cad Plan Aligned as per Datum elements?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.2	Are Wall types and thickness followed as per Plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.3	Wall is categorized into exterior/interior correctly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.4	Wall Type is named according to naming conversion?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.5	Is wall plaster applied properly in all necessary places?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.7	Are Doors and Windows placed on walls as per drawing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.8	Door type and number is as per schedule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.10	Is opening placed properly on Lift walls?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.11	FFL values matching as per drawing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.12	FFL Thickness is Correct as per drawing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.13	Floor type is named according to naming conversion?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.14	Is Floor sketch covered the SSL area Properly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.15	Is Floor finish applied as per the Schedule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.16	Are Wall Tiles applied as per schedule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.17	Wall Finishes applied as per schedule?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.20	Is Counter top for washbasins modeled as per plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.21	Skirting applied on all areas as per plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.22	Material applied as per schedule for skirting?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.23	Is Ceiling modelling done as per drawing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.24	Ceiling type is named according to naming conversion?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.25	Height Offset is proper as per plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.26	Ceiling vertical Transition modeled properly as per the	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.30	All other required linked models are pinned?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.31	Are Room names and Room numbers placed as per AutoCAD Plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.32	Is Railing modeled as per Plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.33	Is Parking Component placed as per Floor Plants location?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.34	Assembly code is assigned according to Excel?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.35	Are all Materials have element keynote?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.36	Is Top Alignment of the wall done as per Structure?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.37	All exterior Elements are modeled properly as per the facade details?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.38	Vision panel, Spandrel Panel, Openable Panel are modeled properly as per the given input?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.39	All ACP claddings are modeled with the given profile?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.40	Is Furniture (3D element) placed as per the Plan?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.41	All the unwanted families has been deleted?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
2.42	All walls are attached with ceiling or beam in section?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
LINKED MODEL					
3.1	No CAD files is imported directly into the model	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.2	Each Linked file is on it's own Workset	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.3	Each Linked file is loaded	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.4	Each Linked file is pinned	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.5	Each Linked file is positioned correctly	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.6	Each Linked file has a correct scale.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
3.7	Each Linked file is Not sharing coordinates with Grids and	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
WORKSET					
4.1	Workset of the Linked files from other disciplines are named: +Link_name of the file as per BEP's model list.schedules have been named as per Naming Convention.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	

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4.2	Different Worksets are created for all the elements by discipline and content type as per BEP	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.3	All the Content worksets are named based on BEP.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
4.4	All the elements are placed in their relative worksets.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
PROJECT BROWSER					
5.1	All the views are based on the Project Standard Templates for related discipline.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.2	Are the views correctly organized on the related View Templates?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
5.3	All the working views are deleted.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
FAMILIES					
6.1	All the families are taken from Project Library and follows the BEP naming conventions.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
6.2	Is there any additional family added? Please Report to the BIM Manager.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
6.3	Is there any Custom Model-In-Place in the files? Please Report to the BIM Manager.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
PARAMETERS					
7.1	All the Parameters are taken from Project Shared Parameter file.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
7.2	Is there any additional Parameters added? Please report to the BIM manager.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
7.3	All the Material naming conventions are as per BIM Manual.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
7.4	All the assets are tagged	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
SHEETS					
8.1	Reference Drawing Nos. is added.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
8.2	General Notes required in the drawings are added.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
8.3	Title Block Revisions and Titles are filled correctly.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
8.4	All sheets are organized by the sheet number?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
QUANTITY TAKEOFF					
9.1	Prefab Panels	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.2	Brick	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.3	Metal Panels	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.4	EIFS	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.5	Split Face Block	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.6	Rainscreen Panels	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.7	Other Cladding Material	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.8	Window Wall	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.9	Other Cladding Material	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.10	Punch Windows	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.11	Louvers	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.12	Exposed Concrete	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.13	Wall Framing	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.14	Ceiling Framing	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.15	Acoustical ceiling grid	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.16	Sheetrock	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.17	Taping	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.18	Cover coat	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.19	Insulation	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.20	Access Doors	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.21	Masonry-CMU	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.22	Floor Material	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.23	Base Molding	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.24	Saddles	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.25	Doors	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.26	Roofing Material	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.27	Roof Pavers	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.28	Roof Wood Decking	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.29	Green Pavers	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.30	Roof Insulation	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.31	Railings	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.32	Ladders	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.33	Canopy, Dunnage,	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.34	Terrace Dividers	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	

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9.35	Kitchen Type	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.36	Bathroom Type	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.37	Kitchen Appliances	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.38	Flooring Finish - Vinyl Wood, Carpet, Tile	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	
9.39	Wall Finish - Tile, Wallpaper	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> NA	