



# BAR BENDING SCHEDULE (BBS) CHECKLIST

## Professional Reinforcement Review & Pre-Execution Verification

Use this checklist to review reinforcement details, bar bending schedule data, and execution readiness before fabrication and placement.

| PROJECT / CLIENT                           |   |                    |                          | DATE OF REVIEW |                                    |   |                          | CHECKED BY                                      |                                     |                            |                          | DRAWING REF. |                                  |                    |                          |
|--|---|--------------------|--------------------------|----------------|------------------------------------|---|--------------------------|---|-------------------------------------|----------------------------|--------------------------|--------------|----------------------------------|--------------------|--------------------------|
|  |   |                    |                          |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| <b>A PROJECT &amp; DRAWING INFORMATION</b> |   |                    |                          |                |                                    |   |                          | <b>B MEMBER IDENTIFICATION &amp; DIMENSIONS</b> |                                     |                            |                          |              |                                  |                    |                          |
| No.  | Checklist Item                            | Options / Write-in | <input type="checkbox"/> | No.            | Checklist Item                     | Options / Write-in                            | <input type="checkbox"/> | No.   | Checklist Item                      | Options / Write-in         | <input type="checkbox"/> | No.          | Checklist Item                   | Options / Write-in | <input type="checkbox"/> |
| 1.   | Project name / reference                  |                    | <input type="checkbox"/> | 8.             | Member type identified             | Beam / Column / Slab / Footing / Stair / Wall | <input type="checkbox"/> | 9.  | Member mark / ID noted              |                            | <input type="checkbox"/> | 10.          | Length verified                  |                    | <input type="checkbox"/> |
| 2.   | Structural drawing number                 |                    | <input type="checkbox"/> | 11.            | Width / thickness verified         |   | <input type="checkbox"/> | 12.   | Clear cover considered              |                            | <input type="checkbox"/> | 13.          | Section dimensions match drawing | Yes / No           | <input type="checkbox"/> |
| 3.   | BBS revision number                       |                    | <input type="checkbox"/> | 14.            | Bar placement zones identified     | Yes / No                                      | <input type="checkbox"/> | 15.   | Any opening / offset considered     | Yes / No                   | <input type="checkbox"/> |              |                                  |                    |                          |
| 4.   | Member / element reference                |                    | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 5.   | Location / floor / grid                   |                    | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 6.   | Design standard / code reference          |                    | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 7.   | Approved latest drawing available         | Latest / Pending   | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| <b>C REINFORCEMENT DETAILS</b>             |   |                    |                          |                |                                    |   |                          | <b>D SHAPE, BENDING &amp; CUTTING DATA</b>      |                                     |                            |                          |              |                                  |                    |                          |
| No.  | Checklist Item                            | Options / Write-in | <input type="checkbox"/> | No.            | Checklist Item                     | Options / Write-in                            | <input type="checkbox"/> | No.   | Checklist Item                      | Options / Write-in         | <input type="checkbox"/> | No.          | Checklist Item                   | Options / Write-in | <input type="checkbox"/> |
| 16.  | Bar mark assigned correctly               | Yes / No           | <input type="checkbox"/> | 26.            | Bar shape code provided            |   | <input type="checkbox"/> | 27.   | Hook details specified              |                            | <input type="checkbox"/> | 31.          | Bar length unit confirmed        | mm / m             | <input type="checkbox"/> |
| 17.  | Bar diameter specified                    |                    | <input type="checkbox"/> | 28.            | Bend angles noted                  |   | <input type="checkbox"/> | 32.   | Shape dimensions complete           | Yes / No                   | <input type="checkbox"/> | 33.          | Bending allowances considered    | Yes / No           | <input type="checkbox"/> |
| 18.  | Number of bars noted                      |                    | <input type="checkbox"/> | 29.            | Bend lengths noted                 |   | <input type="checkbox"/> | 34.   | Fabrication remarks added if needed | Yes / No                   | <input type="checkbox"/> |              |                                  |                    |                          |
| 19.  | Top bars identified                       | Yes / No           | <input type="checkbox"/> | 30.            | Cutting length calculated          |   | <input type="checkbox"/> |   |                                     |                            |                          |              |                                  |                    |                          |
| 20.  | Bottom bars identified                    | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 21.  | Distribution / secondary bars noted       | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 22.  | Stirrups / ties / rings specified         |                    | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 23.  | Extra bars / crank bars included          | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 24.  | Laps / splices identified                 | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 25.  | Anchorage / development length considered | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| <b>E QUANTITY &amp; WEIGHT SUMMARY</b>     |   |                    |                          |                |                                    |   |                          | <b>F EXECUTION &amp; FINAL REVIEW</b>           |                                     |                            |                          |              |                                  |                    |                          |
| No.  | Checklist Item                            | Options / Write-in | <input type="checkbox"/> | No.            | Checklist Item                     | Options / Write-in                            | <input type="checkbox"/> | No.   | Checklist Item                      | Options / Write-in         | <input type="checkbox"/> | No.          | Checklist Item                   | Options / Write-in | <input type="checkbox"/> |
| 35.  | Number of pieces verified                 |                    | <input type="checkbox"/> | 43.            | Site placement sequence considered | Yes / No                                      | <input type="checkbox"/> | 47.   | Fabrication approval status         | Approved / Review Required | <input type="checkbox"/> | 48.          | Final remarks                    |                    | <input type="checkbox"/> |
| 36.  | Total length per bar mark checked         |                    | <input type="checkbox"/> | 44.            | Congestion risk reviewed           | Yes / No                                      | <input type="checkbox"/> |   |                                     |                            |                          |              |                                  |                    |                          |
| 37.  | Unit weight considered                    |                    | <input type="checkbox"/> | 45.            | Constructability issues noted      | Yes / No                                      | <input type="checkbox"/> |   |                                     |                            |                          |              |                                  |                    |                          |
| 38.  | Total steel weight calculated             |                    | <input type="checkbox"/> | 46.            | Site engineer review completed     | Yes / No                                      | <input type="checkbox"/> |   |                                     |                            |                          |              |                                  |                    |                          |
| 39.  | Wastage allowance reviewed                | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 40.  | Summary totals cross-checked              | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 41.  | Item grouping clear and organized         | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |
| 42.  | Bar schedule matches drawings             | Yes / No           | <input type="checkbox"/> |                |                                    |   |                          |   |                                     |                            |                          |              |                                  |                    |                          |

| NOTES / REMARKS                                 | ENGINEER / CHECKER SIGNATURE | DATE  |
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