

### **Inspection Plan Checklist**

## **Patching**

Doc.Ref-ITC-005-Rev1

**Project Information** 

| Name:            | Wellington St Student             | Work:     | All applicable |  |
|------------------|-----------------------------------|-----------|----------------|--|
|                  | Accommodation                     |           |                |  |
| Address:         | 325-335 Wellington Street, Perth, | Location: |                |  |
|                  | WA 6000                           |           |                |  |
| Head Contractor: | Buuilt                            | Drawing   |                |  |
|                  |                                   | Ref.:     |                |  |

#### **Details**

| PECOMMENCEMENT                            | STATUS |     |      |  |  |
|---|--------|-----|------|--|--|
| SPECIFICATION / DRW No.                   | OK     | N/A | DATE |  |  |
| DESIGN & COMPUTATIONS                     |        |     |      |  |  |
| SAMPLES                                   |        |     |      |  |  |
| MATERIALS MEET SPECIFICATION REQUIREMENTS |        |     |      |  |  |
| CHECK FOR DAMAGE                          |        |     |      |  |  |
| MAINTAIN SUITABLE STORAGE                 |        |     |      |  |  |
| INSTALLATION REPORT                       |        |     |      |  |  |
| Item 1: CEILINGS                          |        |     |      |  |  |
| Item 2: WALLS                             |        |     |      |  |  |
| Item 3: CLEAN UP                          |        |     |      |  |  |
| N.C.N. / C.A.R.                           |        |     |      |  |  |
|   |        |     |      |  |  |

#### **FINAL INSPECTION**

| COMMENTS.      |      |           |          |      |  |
|----------------|------|-----------|----------|------|--|
| OTHER:         |      |           |          |      |  |
| BUILDER:       |      |           |          |      |  |
| SUBCONTRACTOR: |      |           | Foreman  |      |  |
| WITNESSED BY:  | NAME | SIGNATURE | POSITION | DATE |  |

#### COMMENTS:



# **Inspection and Test Plan**

| Scope  | : Patching   | ľ                 | TP Document No.: 5               |                              | Revi    | sion No. A                            | Date of         | Revision: 1 | 15/03/2024 |
|--|--|-------------------|----------------------------------|------------------------------|---------|---------------------------------------|-----------------|-------------|------------|
| Project Name: Wellington St Student Accommodation                              |  |                   | Orga                             | Organization Name: Multiplex |         |                                       |                 |             |            |
|  | Project Address: 325-335 Wellington Street, Perth, WA 6000                           |                   |                                  |                              |         |                                       |                 |             |            |
|  | red by   |                   |                                  |                              |         | X /                                   |                 |             |            |
| Name   | Name: Austin Han Position: Contract Administrator Signature: August Date: 15/03/2024 |                   |                                  |                              |         |                                       |                 |             |            |
| Appro  | ved by   |                   |                                  |                              |         | 77, 1                                 |                 |             |            |
| Name   | : ShuHan Hong  | F                 | Position: Site Foreman           |                              | Sign    | ature: 🖊 👉 🤫                          | <b>Date:</b> 15 | 5/03/2024   |            |
|  |  |                   |                                  |                              |         |                                       |                 |             |            |
| Level:   |  |                   |                                  |                              |         | No./Area:                             |                 |             |            |
| Projec   | t Specification: AR-   | SPC01   Australia | an Standards: AS2589   Project   | Drawing                      | s: HB-A | .R-00, HB-AR-03, HB-AR-               | -05 Series      |             |            |
|  |  |                   | 14/ 14/2                         |                              |         | "" B B '                              |                 |             |            |
|  | T  | T = .             |                                  |                              |         | urveillance, R = Review               |                 |             |            |
| ltem   | Activity   | Reference         | Acceptance Criteria              | Freque                       | ncy     | Verification                          |                 | Inspection  |            |
|  |  | Documents         |                                  |                              |         | Records/Comments                      | Subcontractor   | Built       | Client     |
| 1  | Check ceilings   | Architect         | Architect RCP drawings           | gs Each unit                 |         | Visual                                | S               | S           |            |
|  |  | drawings          | approved by Built.               |                              |         | Checklist                             |                 |             |            |
|  |  |                   |                                  |                              |         | Attached marked off                   |                 |             |            |
| 0  | Ob a alconalla   | Analaitaat        | Analistant CA mlan 9 wall        |                              |         | drawings and photos                   | 0               |             |            |
| 2  | Check walls  | Architect         | Architect GA plan & wall         | Each unit                    |         | Visual<br>Checklist                   | S               | S           |            |
|  |  | drawings          | type drawings approved by Built. |                              |         | Attached marked off                   |                 |             |            |
|  |  |                   | by Built.                        |                              |         | drawings and photos                   |                 |             |            |
| 3  | Clean up   | Architect         | Waste all cleaned. Tools         | Each location                |         | Visual                                |                 | R           |            |
| Ü  | Clour up   | drawings          | and materials placed well.       |                              |         | Checklist                             |                 |             |            |
|  |  |                   | , , , , , , ,                    |                              |         | Attached marked off                   |                 |             |            |
|  |  |                   |                                  |                              |         | drawings and photos                   |                 |             |            |
|  |  |                   |                                  |                              |         |                                       |                 |             |            |
| Comments:  |  |                   |                                  |                              |         |                                       |                 |             |            |
| Date of Inspection: Carried  |  |                   | Carried                          | arried out by:               |         |                                       |                 |             |            |
|  |  |                   |                                  |                              |         |                                       |                 |             |            |
| Verification Statement Attachments   |  |                   |                                  |                              |         |                                       |                 |             |            |
|  |  |                   |                                  | ☐ Checklists ☐ Photos        |         |                                       |                 |             |            |
| <b>y</b> ,,  |  |                   |                                  | ☐ Dockets ☐ Sample Material  |         |                                       |                 |             |            |
|  |  |                   | e to verify with documented evid |                              |         | □ Drawings □ Calibration Certificates |                 | cates       |            |
| that the work has been completed and confirms to the contract specification(s) |  |                   |                                  |                              |         |                                       |                 |             |            |
| Siana  | ☐ Inspection reports   |                   |                                  |                              |         |                                       |                 |             |            |
| Signe  | igned : Date:  |                   |                                  |                              |         |                                       |                 |             |            |