



## MAINS AND SUBMAINS

ABN 85 158 865 091

Locked Bag 2228  
North Ryde NSW 1670

Phone: (02) 9855 6666

Facsimile: (02) 9855 6655

<b>Client:</b> John Holland Group	<b>Project Name:</b> Shoalhaven Hospital Redevelopment	<b>Job No:</b> NEC00138	<b>Sheet:</b> _____ Of _____
<b>Contract Manager:</b> <u>Brett Lavorato</u>	<b>Project Manager:</b> <u>Michael McGeehan</u>	<b>Site Supervisor:</b> <u>Andrew Cairns</u>	<b>Date:</b> _____
<b>Check Authorised By:</b> <u>Michael McGeehan</u>	<b>Signature:</b> _____	<b>Check Delegated To:</b> _____	<b>Signature:</b> _____

[illegible]

COMMENTS:

NCR No:

FINAL ACCEPTANCE	NAME	SIGNATURE	POSITION	APPROVED (YES/NO)	DATE
HEYDAY GROUP (REPRESENTATIVE):					
CLIENT (REPRESENTATIVE):					
AUTHORITY (IF APPLICABLE):					

(Client and Authority may elect or not elect to sign the acceptance).

**ACCEPTANCE CRITERIA:** AS PER ITP = (1) AS3000 WIRING RULES. (2) SPECIFICATION. (3) LATEST ISSUE OF DRAWINGS. (5) SUPPLY AUTHORITY APPROVAL.