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| **Lot No:**  **Schedule:**  **Package:** | | | | |
| Work Start Date: |  | Work Finish Date: |  | Underlying Lot: |

| **Controlled Work Activities from ITP** | | | | | | |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Specifications** | **Type** | **Confirms** | **Client** | **RSA** | **Comments** |
| 01 | **Survey Set Out**  The contractor shall be responsible for engaging a licensed surveyor of Australia approved by the Superintendent to set out all works in accordance with the design drawings prior to the commencement of the works. | WP | Yes / No |  |  |  |
| 02 | **Lot Identification**  Location of works identified in accordance with the Project Technical Specifications | CHK | Yes / No |  |  |  |
| 03 | **Topsoil Stripping**  Topsoil shall be stripped such that all organic rich soil and roots/rootlets has been removed from the foundation of the embankment and internal borrow areas  Topsoil shall be stripped to the depth(s) 200mm indicated on BOQ. Any areas with depth greater than 200mm should be notified to the superintendent. | HP | Yes / No |  |  |  |
| 04 | **Stockpile of Materials**  Stripped topsoil shall be stockpiled where directed by the Superintendent, for reuse. Topsoil Stockpiles to be ameliorated and treated as per company’s directions.  Topsoil is to be placed in a loose, non-compacted state, to a maximum height of 3 metres | HP | Yes / No |  |  |  |
| 05 | **Survey after topsoil removal**  As-constructed survey has been completed to record the surface levels on completion of topsoil stripping.  The Contractor shall submit results of each survey to the superintendent within 48hours of undertaking the Survey. | HP | Yes / No |  |  |  |

| **Inspection and Verification Statement** | |
| --- | --- |
| Inspection:  Verification: | I declare that the above work has been inspected, and the recorded results of the inspections are correct.  Inspected by :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signed) \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_(am/pm)  I verify that the recorded results of the above inspections are correct.  Inspected by :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Signed) \_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_(am/pm) |

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| **Document Status** | | | | | |
| **Revision Status** | **Responsible Person** | Signed | | **Dated** | **Revision** |
| **Draft By:** | Madhu Achana | |  |  | Rev0 |
| **Reviewed By:** |  | |  |  |  |
| **Submitted By:** |  | |  |  |  |
| **Approved By:** |  | |  |  |  |