

**UNDERGROUND UTILITIES DAMAGE REPORT**  
**Section: 01 18 16.14**

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DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ CONTRACT No.: \_\_\_\_\_

PROJECT: \_\_\_\_\_ CONTRACTOR: \_\_\_\_\_

UTILITY: \_\_\_\_\_

LOCATION (Attach sketch, including location, depth, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TIME/DATE RETURNED TO SERVICE: \_\_\_\_\_ WAS UTILITY MARKED? \_\_\_\_\_

WAS EXCAVATION EQUIPMENT USED? WHAT KIND? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DESCRIBE HOW DAMAGE OCCURRED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

WHAT PRECAUTIONS WERE TAKEN? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COMMENTS/RECOMMENDATIONS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ATTACHMENTS: \_\_\_\_\_

\_\_\_\_\_

SIGNED \_\_\_\_\_

cc: Airfield Operations Projects and Standards Administrator  
Construction Manager

**- END OF SECTION -**