

Appendix I: M&E Testing and Commissioning Forms

CONTRACT No,

Contract Name

HANDING OVER REPORT

 Report No: Location of Inspection: Reference No:

 Time: 00.00 ☐ am ☐ pm Sat ☐ Sun ☐ Mon ☐ Tue ☐ Wed ☐ Thu ☐ Fri ☐ Date:

PART A : INSPECTION TEAM

Contractor	
Consultant	
Client	DMAT

PART B : WORK TO BE HANDED OVER

 Type of station: Outfall ☐ Pedestrian Underpass ☐ Traffic Underpass ☐ Lifting Station ☐ Subsoil Drainage ☐

Item	Description	Unit	Qty	Reference Documents
	MECHANICAL ITEMS			SECTION B - BILL NO

Item	Description	Unit	Qty	Reference Documents
	ELECTRICAL WORKS			SECTION B - BILL NO

Item	Description	Unit	Qty	Reference Documents
	Instrumentation & Control			SECTION B - BILL NO

PART C : SITE OBSERVATIONS / FINDINGS LIST