IPD Stage 2UT1 – Utilities Unit QC Checklist

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| --- | --- |
| **SPOT ID/Project TIP #:** |  Click to edit. |
| **County:** |  Click to edit. |

2UT1 SUE Request

| **Item #** | **Review Item** | **Yes** | **No** | **N/A** |
| --- | --- | --- | --- | --- |
|  | **2UT1 SUE Request** |
|  | DGN file provided containing only test hole locations, with station and offset labeled and test holes numbered. |[ ] [ ] [ ]
|  | Test holes are numbered sequentially beginning with next available number after the previous request, if any. |[ ] [ ] [ ]
|  | PDF provided showing test hole locations on plans with station and offset labeled and test holes numbered. |[ ] [ ] [ ]
|  | Notes identifying utilities to locate at Level B placed in DGN and on PDFs. |[ ] [ ] [ ]
|  | All test holes requested comply with the guidelines of section 4.2.5 of the Utilities Accommodation Manual. |[ ] [ ] [ ]
|  | The number of test holes is minimized where practical. |[ ] [ ] [ ]
|  | The pdf was produced using the most recent design files and fs file. |[ ] [ ] [ ]
|  | A list of utilities that might be encountered is provided with the request. |[ ] [ ] [ ]
|  | **Deliverables** |
|  | QC approves pdf and dgn for SUE request. |[ ] [ ] [ ]
|  | **Submittal Components** |
|  | CADD file with survey locations |[ ] [ ] [ ]
|  | pdf of survey locations on plans |[ ] [ ] [ ]
|  | Description of possible utilities to encounter |[ ] [ ] [ ]
|  | Up to date gpk file |[ ] [ ] [ ]

*For items marked* ***No*** *that require further explanation, provide comments or action items in the table below.*

| **Item #** | **Comments and Action Items** |
| --- | --- |
|  Click to edit. |  Click to edit. |

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| ***This checklist may not be comprehensive to every project. All items may not be applicable for smaller projects. It is the responsibility of the reviewer to ensure that an adequate review is performed.*** |
| **QC Reviewer Name:** |  Click to edit. | **Date:** |  Click to edit. |
| **QC Reviewer (Signature):** |  |  |  |