IPD Stage 4UT1 – Utilities Unit QC Checklist

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

4UT1 – UBO Plans and Special Provisions

| **Item #** | **Review Item** | **Yes** | **No** | **N/A** |
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|  | **UBO Plans** | | | |
|  | General |  |  |  |
|  | Plans use UBO title sheet and plan sheets |  |  |  |
|  | Review plans are in color. Final plans are in black and white. |  |  |  |
|  | The plans were prepared using the utilities CADD workspace and format. |  |  |  |
|  | Each sheet has the correct project number and sheet number. |  |  |  |
|  | Plans are clear and legible when printed half-size. |  |  |  |
|  | Title Sheet |  |  |  |
|  | Title sheet lists only utilities in conflict and constructed by others, and in same order as the Special Provisions. |  |  |  |
|  | Title sheet graphically show correspondence between roadway sheet numbering and UBO sheet numbering. |  |  |  |
|  | Appropriate project personnel are listed on the title sheet. The Utilities Lead is listed, and all other personnel listed were involved in the project. |  |  |  |
|  | All project information is correct. Work performed section lists the utility types being relocated in plans. |  |  |  |
|  | Vicinity map is included, and all parts are legible. |  |  |  |
|  | Plan Sheets |  |  |  |
|  | All utility relocations shown match the authorized plans from the agreements for each utility. |  |  |  |
|  | All sheets have project begin or end flags, or match lines labeled with appropriate matching sheets. |  |  |  |
|  | All reference files and levels required for utilities plans are shown on the plans. |  |  |  |
|  | Plans use the project scale. |  |  |  |
|  | The correct line styles and levels are used. All drafting is clear. Plan labels do not hide plan features or information. |  |  |  |
|  | All levels required for roadway plans are shown, except: |  |  |  |
|  | COGO levels have been removed. |  |  |  |
|  | Baselines have been removed. |  |  |  |
|  | Drainage details have been removed. |  |  |  |
|  | Plans show all utility relocations constructed by others. Plans only show utility relocations by others. |  |  |  |
|  | Plans depict the expected state of relocations at the date of availability. Relocations expected to have been accomplished by the date of availability are described in past tense. Relocations still to be performed at the date of availability are described in future tense. |  |  |  |
|  | Abandoned utilities labeled as abandoned and removed poles labeled as removed. It is clear if utilities are being retained. |  |  |  |
|  | All utilities are identified by company. |  |  |  |
|  | No unverified or unverifiable information is included, such as depth of installation or dimensions from surveyed or proposed features. |  |  |  |
|  | At least the following utility features are shown on the plans. More may be appropriate. |  |  |  |
|  | Overhead lines, identified as power or communications. |  |  |  |
|  | Poles and guys. |  |  |  |
|  | Underground lines, identified by type. |  |  |  |
|  | Pedestals and hand holes. |  |  |  |
|  | Utility vaults. |  |  |  |
|  | Bore pit and HDD entry and exit locations only if the work is to be performed during the period of the highway contract. |  |  |  |
|  | On site detours and work bridges are shown where applicable on the plans. |  |  |  |
|  | **UBO Special Provisions** | | | |
|  | The most recent UBO Special Provisions Template was used in preparation of the Special Provisions. |  |  |  |
|  | The name of the Utility Coordinator preparing the Special Provisions and the name, address, and telephone number of the firm are provided at the beginning of the special provisions. |  |  |  |
|  | Each utility is listed in the same order as on the UBO plans title sheet. |  |  |  |
|  | Only utilities performing at least some of their own relocations are listed. |  |  |  |
|  | For each utility, a contact name and preferred contact information is provided. |  |  |  |
|  | If the intention is to relocate by date of availability, no date is given. If a later date is projected, that date is given. If relocations for the utility are complete for a utility, it is stated that relocations are complete. No durations are given for work not triggered by notification by the contractor. |  |  |  |
|  | If construction progress or the contractor is to trigger work to be performed during the period of the roadway contract, a requirement is included requiring the contractor to notify the utility to begin, specifying notice required and duration of work. |  |  |  |
|  | Provisions don’t describe work depicted on the plans unless that description is necessary to distinguish relocations performed during the period of the contract from work completed prior to availability. |  |  |  |
|  | All dates and durations are clearly and absolutely expressed. No dates or durations are given relative to conditions outside of the control of the contractor, e.g., completion of right of way acquisition. All dates and durations given are generated with the best available information available at the time written. |  |  |  |
|  | The schedule given in this document are accurate, achievable, and realistic. |  |  |  |
|  | The date in the footer has been updated. |  |  |  |
|  | **Deliverables** | | | |
|  | The latest version of the QC checklist is being used. |  |  |  |
|  | QC approves UBO Plans and submits to Utilities Lead for review. |  |  |  |
|  | QC approves UBO Special Provisions and submits to Utilities Lead for review. |  |  |  |
|  | The plan sheet pdf files are named and numbered in accordance with the requirements for file naming. |  |  |  |
|  | The special provisions pdf file is named in accordance with the requirements for file naming. |  |  |  |

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

| **Item #** | **Comments and Action Items** |
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| 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):** | |  |  |  |