Checklist – CAC040M
Retaining Structures (MRTS03)

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| --- | --- | --- | --- | --- | --- |
| Contractor |  | Date |  | Review No. |  |
| Contract No. |  | Project No. |  | Project Name |  |

| Reference | Requirements | Addressed | Comments/Observations |
| --- | --- | --- | --- |
| Reinforced Concrete Retaining Wall |
| Cl 50.2 | Materials* Do Materials comply with Specifications?
* Are materials being supplied from an approved supplier?
 |  |  |
| Cl 50.3 | Where necessary:* Have excavations been carried out to permit construction?
* In accordance with MRTS04 Clause 13.3.1 (Bottom of Excavation)?
 |  |  |
| Cl 50.3 | Has it been ensured that:* Retaining walls have been constructed in accordance with the drawings
 |  |  |
| Cl 50.4 | Tolerances* Does finished surface meet Specification requirements
 |  |  |
| Concrete Masonry Retaining Walls |
| Cl 51.2 | Materials* Do Materials meet Specifications requirements
 |  |  |
| Cl 51.3 | Have concrete masonry retaining walls been constructed in accordance with Drawings? |  |  |
| Cl 51.3 | * Has the insitu material in the excavation been compacted in accordance with MRTS04?
 |  |  |
| Cl 51.4 | Tolerances* Does finished surface meet Specification requirements
 |  |  |
| Crib Walls |
| Cl 52.2 | Is backfilling material* Free draining granular material conforming MRTS04 Clause 19.2.4 (General Earthworks)?
 |  |  |
| Cl 52.3 | Are crib walls constructed in the locations and in accordance with the details shown on the Drawings? |  |  |
| Cl 52.3 | * Has the insitu material in the excavation been compacted in accordance with MRTS04?
 |  |  |
| Cl 52.3 | Has it been ensured that:* Crib walls are installed to manufacturer's recommendations and in accordance with the Drawings?
 |  |  |
| Cl 52.3 | Following installation has:* Each course of the wall been backfilled in and behind the crib units as specified by manufacturer and compacted using appropriate mechanical tampers?
 |  |  |
| Cl 52.4 | Tolerances* Does finished structure meet Specification requirements
 |  |  |

*Delete below section if not required*

|  |  |  |  |
| --- | --- | --- | --- |
| Audited by: |  |  |  |
| Name |  | Signature |  | Date |  |