

REPORT ON GEOTECHNICAL INSPECTION

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|-------------|--|---------------|--|-----------|--|
| PROJECT NO: | | PROJECT NAME: | | LOCATION: | |
|-------------|--|---------------|--|-----------|--|

| | | | | | | | | |
|--------------|--|--------------|--|--------|-----|--|-------|--|
| ARRIVE SITE: | | DEPART SITE: | | TRAVEL | TO: | | FROM: | |
|--------------|--|--------------|--|--------|-----|--|-------|--|

A. REPORT NUMBER

| | |
|---|--|
| Issued To: <input style="width: 90%;" type="text"/> | Attention: <input style="width: 90%;" type="text"/> |
| Copy To: <input style="width: 100%;" type="text"/> | |
| Prepared by: <input style="width: 90%;" type="text"/> | Issue Date: <input style="width: 90%;" type="text"/> |

B. INSPECTION

Structure:

| | | | | |
|--|---|--|----------------------------------|---------------------------------|
| <input type="checkbox"/> Embankment | <input type="checkbox"/> Cutting | <input type="checkbox"/> Bridge | <input type="checkbox"/> Culvert | <input type="checkbox"/> Tunnel |
| <input type="checkbox"/> Retaining Wall | <input type="checkbox"/> Subsoil / rubble drain | <input type="checkbox"/> Construction material | | |
| <input type="checkbox"/> Others <input style="width: 80%;" type="text"/> | | | | |

Location:

Element of Assessment:

| | | |
|---|--|--|
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Slope stability | <input type="checkbox"/> Material quality (visual) |
| <input type="checkbox"/> Spread Footing | <input type="checkbox"/> Pile footing | <input type="checkbox"/> Others <input style="width: 80%;" type="text"/> |

Design Criteria to be Verified:

Reference Document:

| | |
|--|--|
| <input type="checkbox"/> Specification No.: | <input style="width: 90%;" type="text"/> |
| <input type="checkbox"/> Design Drawing No.: | <input style="width: 90%;" type="text"/> |
| <input type="checkbox"/> Other documents: | <input style="width: 90%;" type="text"/> |

C. VERIFICATION / ACCEPTANCE

Meets design criteria/requirements
 Meets design criteria/requirements subject to implementation of the recommendations given in Section D.
 Further work needed to satisfy design criteria/requirements. See Section D.

D. COMMENTS / RECOMMENDATIONS

E. FOLLOW UP INSPECTION

Follow-up inspection required? No Yes

CGC Signature:

Client Signature: