

Foundation Excavation Inspection Checklist

Pre-Excavation Verification

Ensuring site preparation and planning are complete before excavation begins.

| Permit Issue Date | |
|---|--|
| Enter date | |
| | |
| Halling I are at least Open Compatible Described 10 | |
| Utility Locating Confirmation Received? | |
| Yes | |
| □ No | |
| Pending | |
| | |
| Utility Clearance Radius (ft) | |
| Enter a number | |
| | |
| | |
| Site Survey Completed and Approved? | |
| Yes | |
| □No | |
| □NA | |
| | |

| Write something | | |
|--|----------------------|--|
| Erosion and Sediment Co Yes No NA | ontrol Plan Approved | |
| Copy of Approved Permi | :s | |
| ♣ Upload File | | |
| Cavation Dime | | |
| cavation Dime | | |
| cavation Dime | | |
| KCAVATION DIME ifying excavation matches Excavation Length (feet) | | |
| ifying excavation matches Excavation Length (feet) Enter a number | | |
| ifying excavation matches Excavation Length (feet) Enter a number Excavation Width (feet) | | |

| Match Design Depth? Yes No NA |
|---|
| Describe any discrepancies between excavation and design plans. |
| Write something |
| Benchmark/Control Points Verified? Yes No NA |
| Attach Site Survey/Layout Verification (Optional) Upload File |
| Soil Conditions & Stability Assessment of soil types, groundwater, and excavation stability. |
| Describe the observed soil types encountered during excavation. |
| Write something |

| Enter a number | |
|--|--------------|
| Presence of Groundwater? | |
| Yes | |
| No | |
| Observed but Controlled | |
| Groundwater Level (feet/meters) – if applicable | |
| Enter a number | |
| | |
| Observed signs of instability (select all that apply) | |
| Sloughing | |
| Cracking | |
| Bulging | |
| Settlement | |
| None Observed | |
| Description of any observed instability and corrective actions tak | en (if any). |
| Write something | |
| | |
| | <i></i> |
| Soil Bearing Capacity Confirmation? | |
| Confirmed by Geotechnical Report | |
| Pending | |
| | |

Attach Photos of Soil Conditions



Shoring & Slope Stability

Inspection of shoring systems, slope protection, and erosion control measures.

| Maximum Allowable Slope Angle (degrees) | |
|---|---|
| Enter a number | |
| | |
| Shoring System Type (if applicable) | |
| None | |
| ☐ Timber Shoring | |
| Soldier Piles & Lagging | |
| Sheet Piling | |
| Retaining Wall | |
| Other (Specify) | |
| | |
| Description of Shoring/Slope Protection System Used | I |
| Write something | |
| | |
| | |
| | |
| Vertical Spacing of Shoring Supports (inches/feet) | |
| Enter a number | |
| Enter a number | |

| Condition of Shoring Materials (if applicable) Good Fair Poor Not Applicable |
|--|
| Potential Stability Concerns Observed? Sloughing Settlement Water Inflow Lateral Movement None |
| Details of any observed instability or corrective actions taken Write something Photos/Documentation of Shoring/Slope Protection Lypload File |

Utilities & Underground Obstructions

Confirmation of utility locations and clearance of obstructions.

| Utility Location Verification Method As-Built Drawings One-Call System (e.g., 811) Ground Penetrating Radar (GPR) Direct Observation |
|--|
| Details of Utility Locations Confirmed |
| Write something |
| Underground Utilities Identified |
| Gas Line |
| Water Line |
| Sewer Line |
| Electrical Conduit |
| Communication Lines (Phone, Cable, etc.) |
| Other (Specify in long text) |
| Distance from Excavation Edge to Nearest Utility (Feet) |
| Write something |
| Utility Protection Measures Implemented Expose and Locate Pavement Cut |
| Daylighting Other (Specify in long text) |
| Caron (openity in long toxt) |

| Notes on Utility Conditions or Potential Hazards | |
|--|--|
| Write something | |
| Utility Location Maps/Diagrams (if available) Lucation Maps/Diagrams (if available) | |
| Environmental Protection erification of measures to prevent environmental damage. | |
| Erosion and Sediment Control Plan Available? Yes No NA | |
| Description of Erosion and Sediment Control Measures Implemented: Write something | |
| Silt Fences/Barriers Installed? Yes No NA | |

| Distance of Silt Fence from Property Line (feet): |
|---|
| Enter a number |
| |
| Dust Control Measures in Place? |
| ☐ Yes ☐ No |
| □ NA |
| |
| Description of Dust Control Methods: |
| Write something |
| |
| |
| Photos of Erosion and Sediment Controls: |
| ∴ Upload File ∴ U |
| |
| Safety & Access |
| Assessment of safety protocols and access routes to the excavation. |
| Were Competent Person (CP) presence and documentation verified? |
| Yes |
| □ No □ N/A |
| |

| What types of Personal Protective Equipment (PPE) are being used? Hard Hats Safety Glasses High-Visibility Vests Safety Boots Gloves Other (Specify in LONG_TEXT) |
|--|
| If 'Other' PPE was specified, please describe: Write something |
| Are Access and Egress points clearly marked and secured? Yes No N/A |
| Minimum Safe Vertical Distance from Excavation Edge? Enter a number |
| Are warning signs and barricades in place and visible? Yes No N/A |

| Write something | • | |
|-----------------|------------------------------|--|
| Location of nea | rest emergency access point. | |
| | Set My Current Location | |
| | | |
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