

EXCAVATIONS

Excavation inspection report

INSPECTION CARRIED OUT FOR: NAME AND ADDRESS

SITE

EXCAVATION: REFERENCE AND LOCATION

DESCRIPTION, WITH SUPPORTS, EQUIPMENT AND MATERIALS

INSPECT

Every shift, after events, after falls

Where supports or battering are provided, by a competent person, before work in the excavation.

IF NOT SAFE

Tell them before the shift ends

Inform the person the inspection is for, and no work until it is put right (regs 24(1)(a), 22(5)).

REPORT

Copy within 24 hours

With the particulars in regulation 24(1)(b), which the columns below follow.

KEEP

On site, then 3 months

Available to an HSE inspector on site until the work is complete, then for 3 months.

Reason: S start of the shift. E after any event likely to have affected its strength or stability. F after material unintentionally fell or was dislodged (reg 22(4)(a)).

DATE AND TIME	REASON	PLACE INSPECTED, IF NOT AS ABOVE	ANY MATTER THAT COULD GIVE RISE TO A RISK	ACTION TAKEN	FURTHER ACTION NEEDED	SAFE TO WORK	IF NOT: WHO WAS TOLD, WHEN	INSPECTED BY: NAME AND POSITION	SIGNATURE	COPY GIVEN

CDM 2015 REGULATIONS 22(4) AND (5), AND 24. HSE EXPECTS EVERY INSPECTION TO BE RECORDED

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