

Appendix F

Daily Inspection Checklist



Daily Inspection Checklist

Site Location: Person in charge of Site:

Indicate in the following manner in the 'Result' column:			
✓ Acceptable	✗ Not Acceptable	NA Not Applicable	NC Not Checked
Item	Result	Comment	
Stockpile Management			
Are all stockpiles adequately protected to prevent erosion and run-off?			
Fauna			
Visual assessment of habitat preservation measures to ensure integrity			
Vegetation Management			
Visual assessment of vegetation			
Pest Management Strategies			
Visual assessment to determine the effectiveness of pest management			
Erosion and Sedimentation Control			
Erosion/Sediment Controls in place if required			
Is there any presence of sediment or chemical plumes in the water			
Are the controls in good condition, maintained and effective			
Noise and Vibration			
Are all reasonable practicable steps to reduce construction noise and vibration taken?			
Air Quality			
Is dust minimised by limiting the extent of disturbed areas and regular watering?			
Are loads with the potential of generating dust covered or dampened?			
Chemical Management			
Are spill kits stocked and easily accessible?			
Have any environmental incidents occurred since the last report? If yes, have incidents been reported and investigated?			
If chemical and fuel management effective			
Waste Management			
Is all waste stored in a designated waste storage area?			
Is the waste storage area bunded to preventing spills or leakages?			
Is there a need to dispose of any waste from the storage areas?			
Heritage / Archaeology			
Were the appropriate authorities notified, and work stopped, if any heritage or archaeological item or artifact was found? Does the area need to have an exclusion zone			
Staging of Works			
Is being maintained Existing environmental controls inspected Existing environmental controls maintained Environmentally sensitive areas undisturbed Roads fronting site are clean			
Daily Plant Checks			
Have checks been completed for oil, fuel leaks etc.....			



Daily Inspection Checklist

Daily checks on clearing of vegetation	Yes / No	Comment
Number of trees removed per section		
Have any plants of least concern been removed and or relocated		
If yes what plant/s location and location of where plants were relocated to:		
Have any animals of least concern have been injured /removed		
If yes what animal, section /location and locations of where animal (s) were relocated to:		

Further Comments and Actions

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Signed: _____ **Date:** _____

Name: _____ **Position:** _____