

Construction Verification

To be completed by land development Consultant certifying that all requirements are met prior to consent to Statement of Compliance

Title Reference:

Vol:

Folio:

SPEAR Ref:

WPW Ref:

- -

Development details

Development name:

Development address:

Developer:

Accredited Consultant:

Consultant postal address:

Consultant reference:

1. Construction Verification Audit

Asset Description	Date of Test	Passed (please tick)	Failed (please tick)	Comments
Water Reticulation				
(a) Drinking water				
(b) Recycled water				
Trunk/Transfer Water Main				
(a) Drinking water				
(b) Recycled water				
Sewer Reticulation				
Sewer Manholes				
Branch Sewer/Outfall Sewer/Sewer Rising Main				

Have the sewers passed CCTV? (please tick): Yes No NA

Has the CCTV footage been provided to Westernport Water? (please tick): Yes No NA

Payment/Fees

If the survey was arranged by surveyors other than Westernport Water's nominated surveyor, please provide their contact details:

and the date As Constructed Verification Form and As Constructed information was provided to Westernport Water:

Engineering Fees adjusted to actual construction costs (*please tick*): Yes No

Date adjusted Engineering Fees were paid to Westernport Water and Receipt No:

Are the NCCs in Developer Agreement up-to-date? (*please tick*): Yes No

Date NCCs were paid to Westernport Water and Receipt No:

Works Warranty

Date successful certified costs calculations were provided to Westernport Water:

Date the works warranty was sent to Westernport Water and Receipt No:

2. Consultant's Assurance

As the Consultant's Senior Management Representative responsible for the project management of the works detailed in Westernport Water's Development Agreement,

I verify that:

1. The As Constructed works meet:
 - i. The scope and requirements of the Development Agreement;
 - ii. The design intent/issued for construction drawings (Issue for Construction Standards (IFC));
 - iii. The design intent/issued for design drawings (Issue for Construction Standards (IFC)).
2. The Audit Schedule has been satisfactorily undertaken by the Construction Auditor.
3. All Non-Conformances have been satisfactorily resolved and corrective action implemented.
4. A Pre-Acceptance of Works Audit has been undertaken.

Name of Consultant:

Company name:

Address:

Phone:

Consultant's signature:

Date:



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