

## Temporary Works Design Request Form

### General Details

<b>Date Requested:</b>	<b>Date Required On-Site:</b>	<b>Status of Project:</b> Live <input type="checkbox"/> Tender <input type="checkbox"/>
<b>Customer Name:</b>	<b>Contact Details:</b>	
<b>Project Name:</b>		
<b>Site:</b>		
<b>Site Contact Name:</b>	<b>Tel:</b>	<b>Email:</b>
<b>Temporary Works Co-ordinator:</b>	<b>Tel:</b>	<b>Email:</b>
<b>Temporary Works Supervisor:</b>	<b>Tel:</b>	<b>Email:</b>

### Excavation Detail

<b>Project Type:</b> Cofferdam <input type="checkbox"/> Single Sided Excavation <input type="checkbox"/> Trench <input type="checkbox"/> Other: (state) _____		
<b>Excavation Depth:</b>	<b>Over-dig Included?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Plan Dimensions:</b>  Sheet to Sheet <input type="checkbox"/> Inside Frames <input type="checkbox"/>
<b>Clearance Below Bottom Frame:</b>		<b>Clearance Between Struts:</b>

### Ground Conditions

<b>Ground Conditions:</b>	SI Report <input type="checkbox"/>	BH/TP Logs <input type="checkbox"/>	Location Plan <input type="checkbox"/>
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### Additional Information

<b>Surcharge Loading:</b> (Plant/Site) Minimal Surcharge (10 kN/m <sup>2</sup> ) <input type="checkbox"/> General Construction Surcharge <input type="checkbox"/> Other: (state) _____		
<b>Adjacent Structures:</b> Highway/Railway/Watercourses - provide details:	<b>Anticipated Duration of Excavation Support:</b> Temporary: < than 6 weeks <input type="checkbox"/> Temporary: > than 12 weeks <input type="checkbox"/> Temporary: < than 12 weeks <input type="checkbox"/> Permanent: <input type="checkbox"/>	
<b>Design Checking Requirements:</b>	CAT 1 <input type="checkbox"/>	CAT 2 <input type="checkbox"/> CAT 3 <input type="checkbox"/>
<b>Residual Risks &amp; Hazards:</b> Please provide details:		

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### Additional Information - Continued

**Deflection Limitations:** Are there any restrictions on deflection or settlement: Yes ☐ No ☐ Other: (state) \_\_\_\_\_

**Existing Services:** Please provide details of any services in close proximity:

### Method of Working

**Preferred Solution:** Sheet & Frames ☐ Cantilever ☐ Other: (state) \_\_\_\_\_

### Notes

**Notes:** Please provide any other relevant information:

### Supportive Information Checklist

Relevant Drawings & Sketches ☐ Detailed Ground Investigation Report ☐ Temporary Works Design Brief ☐ Photos ☐

### Customer Confirmation (to be confirmed by Temporary Works Co-ordinator)

Signed: (by customer)	Name: (print)	Title:	Date:

**Excavation Support Solutions** | Oakfield House | Rough Hey Road | Preston | Lancashire | PR2 5AR  
**Tel:** 01772 794141 | **Email:** hello@ExcavationSupportSolutions.co.uk | **Web:** www.ExcavationSupportSolutions.co.uk