|  |  |  |
| --- | --- | --- |
|  | Shift (Daily) TTM inspection checklist (TCAWS Manual Appendix E.4 checklist) | TCAWS**INS-02** |
| Checklist to ensure that temporary traffic management (TTM) has been implemented in accordance with the traffic management plan and traffic guidance scheme plan  |

**Disclaimer**

*While care and diligence has been taken to produce the checklists, templates, and example documents (Documents), no responsibility is taken, or warranty made with respect to the accuracy or correctness of the Documents. Transport for NSW expressly disclaim all liability for any omissions, errors, inaccuracy, or incompleteness of any of the Documents and the consequences upon reliance of the Documents.*

*The Documents are provided for general information purposes only. While every attempt has been made to align these documents with the Traffic control at work sites (TCAWS) Technical Manual, the Documents provided are only examples. The use of these Documents may not fulfill all the relevant requirements in the latest release of the TCAWS Technical Manual. It is the obligation of the user to ensure that appropriate modifications are made to meet the requirements of the TCAWS Technical Manual.*

*Disclaimer updated on 20 October 2023, 9:00am*

Shift inspections must be undertaken by a person holding the PWZTMP or ITCP qualification when a TGS is installed, changed or updated, to ensure the TGS is implemented as designed. This includes at a minimum, twice per shift (recommended every 2 hours). This form can also be used for inspecting ‘Aftercare’ arrangements.

|  |
| --- |
| Completed by:  |
| Name: |  | Signature: |  |
| TMP Reference: |  | TGS Reference: |  |
| Date: |  | Time/s | *Inspection 1* | *Inspection 2* | *Inspection 3* |
| 00-00 | 00-00 | 00-00 |
|  |  |  |  |
| Drive through TGS inspection | *Inspection 1* | *Inspection 2* | *Inspection 3* |
| **Have any adjustments been made to the approved TGS?** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| If yes, provide details: | Are changes within tolerances?***If no, TGS must be reviewed by a PWZTMP*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Have changes been approved? ***If no, TGS must be approved*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Have all signs and devices been installed in accordance with approved TGS?*****If no, provide detail of action taken*** | [ ]  Yes[ ]  No  | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| Drive through TGS inspection | *Inspection 1* | *Inspection 2* | *Inspection 3* |
| **Are PTCD positioned as prescribed in TGS?*****If no, provide detail of action taken*** | [ ]  Yes[ ]  No [ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| **Are manual traffic controllers clear of travel lane, have suitable escape route?*****If no, provide detail and reposition manual traffic controllers*** | [ ]  Yes[ ]  No [ ]  N/A  | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| **Are sign and devices in good condition, clearly visible to road users?*****If no, provide detail of action taken*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Are all signs mounted level and suitably clear of travel lanes?*****If no, provide detail of action taken*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Are conflicting or non-applicable signs covered or removed?*****If no, provide detail and remove or cover signs*** | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| Drive through TGS inspection | *Inspection 1* | *Inspection 2* | *Inspection 3* |
| **Is temporary delineation installed as prescribed i.e. straight line forming taper?*****If no provide details and rectify delineation***  | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Have site conditions changed due to shade, park vehicles, glare etc.*****If yes provide details and note if action is required*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Are registered trailers i.e. VMS / light towers; suitably clear of travel lanes and delineated?** ***If no provide details and rectify location*** | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| **Are temporary speed zones operating as prescribed?*****If no provide details and discuss with work supervisor***  | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| **Are workers on foot / plant clearances been applied / observed?*****If no provide details and implement controls to rectify*** | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A | [ ]  Yes[ ]  No[ ]  N/A |
| Comments or details of action taken: |  |
| Post drive through confirmation  | *Inspection 1* | *Inspection 2* | *Inspection 3* |
| **Is TGS valid for the site activity and operating safely as intended?*****If no provide details and implement controls to rectify*** | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Is TGS is appropriate for the current traffic conditions?*****If no provide details and implement controls to rectify*** | [ ]  Yes[ ]  No  | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |
| **Have potential hazards identified in TGS been addressed? i.e. end-of-queue management*****If no provide details of additional hazards and controls required***  | [ ]  Yes[ ]  No  | [ ]  Yes[ ]  No | [ ]  Yes[ ]  No |
| Comments or details of action taken: |  |

Additional comments:

|  |
| --- |
|  |