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Design Information Form

The Design Information Form is used to obtain details from the Client prior to conducting a Risk Assessment Workshop and developing a Safety in Design Report.

PROJECT DETAILS	
Client name	Enter Client name.
Project address	Enter project address.
Project name	Enter project name.
Name of Designer	Enter the name of the lead Designer.
Assessment Completion Date	Enter date this document/assessment is being completed.
Intended use of Structure	Enter - what is the intended use of this Structure? E.g. residential building, school, aged care centre, commercial building, public swimming pool, etc.
Project involves (select all that apply)	<input type="checkbox"/> New structure <input type="checkbox"/> Renovating a structure <input type="checkbox"/> Demolition of existing structure(s)
What is the scope of the Designer's responsibilities? e.g. Concept Design only, End-to-End Project Consultation/Management	Click here to enter.



SITE CONSIDERATIONS

Use of adjacent properties, and any issues? e.g. construction noise, vibration impacts etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Any site, landscaping or topography issues? e.g. large trees to remove, slopes or indentations	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Are there any environmental/ climatic issues on the site? e.g. flooding, fire, cyclone	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Is there contaminated land or landfill?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Are there any acid sulphate soils present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.

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CONSTRUCTION, RENOVATION OR DEMOLITION WORK

Are there any access issues? e.g. high traffic, narrow block	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Overhead or underground services details? e.g. power poles & lines, phone, electricity, gas, sewer	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Are there any issues affecting the operation of mobile plant or cranes? e.g. boggy ground, unstable surfaces, slab loads for suspended slabs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Are there any areas which may involve large excavations or risk of collapse?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.
Are there any hazardous substances to be used or stored on site during the construction?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Click here to provide details.

