


Document: Form 163	Safety and Patrol Inspections	
Issue: 1		
Related to: All Contracts		
Page No. 1 of 1		

Date: 29/5/19 Inspectors: redacted 11(2) Vehicle Reg: redacted 11(2)

Route: A62 A830 Weather: FINE

NW34514366 - 236805

Link / Section	Chalange (m)	XSP	Slope Dist (Meters)	CW Width (m)	Speed MPH	Defect Type		Measurement	Location	Photo No.
10864/00	18	L2	S	6.3	50	RWAY (1)	N/B	PERMANENT REPAIR	NORTH BALLAKHULISH	966
10864/00	3545	RE	S	6.3	50	IRLD (1)	S/B	GULLY ROCKING UNDER LOAD (ALREADY RAISED)	GOLLANFIELD	967
10866/10	3537	L	S	5.8	50	POTV (1)	N/B	PERMANENT REPAIR	CORRYCHURRACAN	968
10866/30	1272	CR1	S	5.6	40	POTV (1)	S/B	" "	ACANTOBE ROAD	969
10967/65	320	RE	S	6.0	30	IRLD (1)	S/B	GULLY ROCKING UNDER LOAD + DAMAGING CARRIAGEWAY	MOCHABER RETAIL PARK	970
17210/30	580	CR1	S	6.5	60	POTV (1)	E/B	PERMANENT REPAIR	POLNISH	971
17210/30	578	CR1	S	6.5	60	POTV (1)	E/B	" "	POLNISH	972
* 17208/15	1604	CL1	S	5.2	60	POTH (1)	W/B	PATCH 0.9 x 1.9	EAST OF GLENFINNAN	973
* 17208/15	1594	CL1	S	5.2	60	POTH (1)	W/B	PATCH 0.7 x 2.7	"	974
* 17208/15	1713	CR1	S	5.2	60	POTH (1)	E/B	PATCH 1.2 x 5.1	"	976
* 17208/15	1705	CR1	S	5.2	60	BFRT (2)	E/B	PATCH 1.1 x 10.6	"	977
* 17208/15	1420	CL1	S	5.2	60	POTH (1)	W/B	PATCH 2.0 x 13.0	"	981
17208/15	1695	L1	S	5.2	60	DIRT (1)	W/B	CLEAN SIGN	"	978

* UNEVEN ROAD SIGNS ERECTED *

Document: Form 057	Daily Work Record	975, 979, 980	BEAR SCOTLAND
Issue: 1			
Related to: All Contracts			
Page No. 1 of 1			

Date	29/5/19		Weather	FINE		
Name	Leave Depot	Arrive Site	TM Setup	TM Remove	Leave Site	Arrive Depot
		14:25			13:50	
Ol Number	Route	Location (Link/Section/Chainage)		Description Of Works		
	A830	17208/15 (1576,1661,1503)				
Work Done			Quantity	Length	Width	Depth
POTHOLE FILLED			1	0.8	0.3	
" "			1	0.4	0.3	
" "			1	0.7	0.3	
Traffic Management			Traffic Scotland Reference			
Type :			On:	Off:		
Materials		Quantity	Supplier or Stock		Comment / Note	
VIAFIX		5	STOCK			
Vehicle Type	Vehicle Registration	Hours	Plant / Tools		Supplier	Hours
redacted 11(2)						
Sign & Name: Foreman / Chargeman		Date	Sign & Name: Operations Manager / Supervisor			Date
		29/5/19				

Health and Safety Risk Assessment Form IMS-F07

Work activities carried out by BEAR Operations Teams



Part 1 Design Stage

1.1 Operations
 Instruction No.(s):
 Route No. and Location: **A830 EAST OF GLENFINNAN**
 Description of activities to be undertaken: **PATCH NO 5 CLEAN SIGN**

1.2 Road Type: Motorway Dual Carriageway Single Carriageway Rural Urban (please tick)

1.3 Was site visited before design commenced? **IF NO**, please explain why:
 Yes No

1.4 Utilities: Are service details adequate and clear on the service drawings provided, e.g. in relation to their position and depth; the voltage of electricity cables, pressure of gas mains or diameter of water pipes? **IF NO**, what action has been taken?
 Yes No

1.5 Site Details:
 Available Road/Lane Width (m) **5.2** Junction(s) Nearby Yes No Bend(s) in Road Nearby Yes No
 Speed Limit (mph) **60** One-way System Yes No Near Pedestrian Facility Yes No
 Other(s) (Please provide details): **NW 34514366 - 236805 973 / 974 / 976 / 977 / 981 / 978**

1.6 Hazards: Please tick boxes below to indicate presence of Hazards on site and those People likely to be affected by the activities to be undertaken:

Health & Safety Hazards		Location / Environment:		People likely to be affected by the activities							
Utilities: <input type="checkbox"/> Electricity Overhead Cables <input type="checkbox"/> Elect. Underground Cables <input type="checkbox"/> Overhead Telecom Cables <input type="checkbox"/> Underground Telecom Cables <input type="checkbox"/> Other Underground Cable		<input type="checkbox"/> Gas Underground Pipe(s) <input type="checkbox"/> INEOS Pipeline (Ethylene) <input type="checkbox"/> Oil Pipeline <input type="checkbox"/> Water Pipe(s)		<input checked="" type="checkbox"/> Live Traffic <input checked="" type="checkbox"/> Noise / Vibration <input checked="" type="checkbox"/> Dust / Fines <input type="checkbox"/> Overgrown Vegetation <input checked="" type="checkbox"/> Poor Lighting <input checked="" type="checkbox"/> Water / River etc Nearby		<input type="checkbox"/> Railway Line <input type="checkbox"/> Injurious Weeds <input checked="" type="checkbox"/> Waste Materials <input checked="" type="checkbox"/> Poor Forward Visibility <input checked="" type="checkbox"/> Restricted space on site <input type="checkbox"/> Poor site access/egress		<input type="checkbox"/> School or College <input type="checkbox"/> Nursery or Care Home <input type="checkbox"/> Hospital <input type="checkbox"/> Shoppers <input checked="" type="checkbox"/> Cyclists		<input type="checkbox"/> Pedestrians close to or crossing the site <input checked="" type="checkbox"/> Drivers (Cars, vans, lorries, motorcycles, buses etc.) <input checked="" type="checkbox"/> Local residents <input checked="" type="checkbox"/> Local businesses	

Please specify any other Hazards or people likely to be affected by the activities that are not covered above:

1.7 Were discussions held with your line manager to clarify completion of activities in a safe manner? **IF YES**, please provide the name of the line manager and the outcome of your discussions: Yes No

1.8 Declaration: I am satisfied that the activities to be undertaken can be completed in a safe manner.
 Signed: Print Name: Position: Date: **21/5/19**

1.9 Was a briefing provided as a result of significant hazards on site? **IF YES**, please provide a summary of the significant hazards and briefing given: Yes No

Attendees (Print Name):	Signature:	Print Name:	Signature:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Briefing given by (Print Name):	Signature:	Position:	Date:	Time:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Defect photo



temporary repair photo



Inspection photos:

