



Washington State
Department of Transportation

Initial Documentation Review (Procedures)

Contract Number		Contract Title	
Review Date	Contract Amount \$	Start Date	Reviewed By
Project Engineer		% Complete	Federal Aid Number

Preconstruction Information (1-2.1C)	Yes	No	Diary Records (10-3.5)	Yes	No
Checklist completed & filed	<input type="checkbox"/>	<input type="checkbox"/>	Project Diary current and signed	<input type="checkbox"/>	<input type="checkbox"/>
Davis-Bacon Statement (Federal)	<input type="checkbox"/>	<input type="checkbox"/>	IDR's complete	<input type="checkbox"/>	<input type="checkbox"/>
Safety Stds. Questionnaire (1-2.2l(3))	<input type="checkbox"/>	<input type="checkbox"/>	Training (1-2.7B)		
Job Site Posters noted (1-2.2k)	<input type="checkbox"/>	<input type="checkbox"/>	Training program submitted before first estimate	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Control (1-2.3)			Program approved	<input type="checkbox"/>	<input type="checkbox"/>
Contractor Letter adopting TCP	<input type="checkbox"/>	<input type="checkbox"/>	Program outline follows requirements	<input type="checkbox"/>	<input type="checkbox"/>
Contractor Letter designating TCM/TCS	<input type="checkbox"/>	<input type="checkbox"/>	Trainees submitted for approval	<input type="checkbox"/>	<input type="checkbox"/>
DOT TCS identified	<input type="checkbox"/>	<input type="checkbox"/>	"Good Faith Effort" documentation provided if non protected person approved.	<input type="checkbox"/>	<input type="checkbox"/>
Force Account (1-2.4D)			Sublets (1-2.4G)		
FA Sheet signed by Inspector & Contractor	<input type="checkbox"/>	<input type="checkbox"/>	Sublets approved before working	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Rates correct	<input type="checkbox"/>	<input type="checkbox"/>	Monthly Employment Utilization Report DOT Form 820-010 (1-2.7A(3))		
Labor Rates correct and documented	<input type="checkbox"/>	<input type="checkbox"/>	Received monthly from prime and sub	<input type="checkbox"/>	<input type="checkbox"/>
OH & P correct	<input type="checkbox"/>	<input type="checkbox"/>	Reviewed by project office	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental markup correct (Sub items)	<input type="checkbox"/>	<input type="checkbox"/>	Change Orders (1-2.4C)		
Progress Schedule (1-2.5A)			Approved before work starts	<input type="checkbox"/>	<input type="checkbox"/>
Approved by Project Engineer	<input type="checkbox"/>	<input type="checkbox"/>	M/W/DBE On-Site Reviews (1-2.4H)		
Project on Schedule	<input type="checkbox"/>	<input type="checkbox"/>	Condition of award M/W/DBE subs on job yet	<input type="checkbox"/>	<input type="checkbox"/>
Employee Interviews (1-2.6C(1)) Federal Projects			Reviews made and submitted to OEO	<input type="checkbox"/>	<input type="checkbox"/>
On file for Prime Contractor	<input type="checkbox"/>	<input type="checkbox"/>	Project Ledger (10-3.9)		
On file for all Subcontractors over 30%	<input type="checkbox"/>	<input type="checkbox"/>	Entries reference source documents	<input type="checkbox"/>	<input type="checkbox"/>
Statement of Intent to Pay Prevailing Wages (1-2.6B)			Item Checks (Procedures)		
On file for Prime Contractor	<input type="checkbox"/>	<input type="checkbox"/>	Item Quantity Tickets	<input type="checkbox"/>	<input type="checkbox"/>
Received before first estimate payment	<input type="checkbox"/>	<input type="checkbox"/>	Scaleman's Daily Report	<input type="checkbox"/>	<input type="checkbox"/>
Payroll Review (1-2.6C) (Prime and All Subs)			Scale Certification	<input type="checkbox"/>	<input type="checkbox"/>
First payrolls checked and initialed	<input type="checkbox"/>	<input type="checkbox"/>	Truck Measure	<input type="checkbox"/>	<input type="checkbox"/>
All other payrolls checked 10%	<input type="checkbox"/>	<input type="checkbox"/>	Concrete Plant Daily Report	<input type="checkbox"/>	<input type="checkbox"/>
Check for the following items			Delivery Tickets	<input type="checkbox"/>	<input type="checkbox"/>
Contract #, Payroll #, Payroll period	<input type="checkbox"/>	<input type="checkbox"/>	Other	<input type="checkbox"/>	<input type="checkbox"/>
Labor classification correct	<input type="checkbox"/>	<input type="checkbox"/>	Materials (Chapter 9)		
Minimum Wage met or exceeded	<input type="checkbox"/>	<input type="checkbox"/>	Record of materials current	<input type="checkbox"/>	<input type="checkbox"/>
Overtime shown separately	<input type="checkbox"/>	<input type="checkbox"/>	Approval of source before use	<input type="checkbox"/>	<input type="checkbox"/>
Travel Pay shown separately	<input type="checkbox"/>	<input type="checkbox"/>	Certification of origin before use	<input type="checkbox"/>	<input type="checkbox"/>
Proof of apprentice registration	<input type="checkbox"/>	<input type="checkbox"/>	Certification of American made steel	<input type="checkbox"/>	<input type="checkbox"/>
Employees address and SSN shown	<input type="checkbox"/>	<input type="checkbox"/>			
Fringe benefits Paid	<input type="checkbox"/>	<input type="checkbox"/>			
Compliance statement signed	<input type="checkbox"/>	<input type="checkbox"/>			
Remarks (Use back for additional remarks)					

DOT Form 230-036A EF
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