Construction Quality Assurance Form

Midland Resolution

Property Information

Property Owner _____ *Contractor Personnel* _____

Property Address _____

Date _____

Field Person _____ *Contractor Equipment* _____

Description of Field Activities

Truck Loads Out _____ *Truck Loads In* _____

Remediation Area (sq ft) _____ *Cut Depth Verified* _____ *(date / initial)*

Describe soils remaining _____

Remarks

_____

_____

_____

_____

_____

Field Representative _____ ***Date*** _____

Weather _____