

Handover Checklist			
Project:			
Description:			
Location:			
Project Manager:			
Principal Consultant:			
Builder:			
Client:			

Safety				
Reviewed By:		Date:		
Description	Yes	No	NA	Comments
Management				
1. Are there any MSDS of any residual hazards that should be managed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are there any identification of any hazardous materials used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Finishing-off / Remedial Works				
1. The nature, scope and duration of any finishing-off work still ongoing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. How will this work be managed and by whom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Will the site be split up, access controlled, and to safeguard construction workers as well as clients' employees and/or members of the public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Performance				
1. Are all Safety (SMR's) Close Out Reports – completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are any respective Incident not yet closed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are there any other issue with neighboring plots?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

4. Settlement of Safety Performance Deduction – if any?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Comments – if any?				
Supporting Photographs <small>(Please reference photographs according to ledger)</small>				

Environmental				
Reviewed By:		Date:		
Description	Yes	No	NA	Comments
Site Installation Removal				
1. Are Storage tanks/ containers and other site related installations removed from site (fence, barriers, porta-cabins etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are sewage tanks removed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are the workshops removed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are the temporary dewatering infrastructure removed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Management / Disposal of Wastes				
1. Hazardous wastes (i.e. chemicals, empty gas cylinders, contaminated soil etc.) removed from site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

2. Non-hazardous wastes (i.e. woods, steel, cardboard, plastics etc.) removed from site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are track records of all disposed wastes in order?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Management / Removal of Materials				
1. Are there any excess construction materials on site (i.e. cement, blocks, woods, steel etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are there any excess or unused paints/fuel/chemicals on site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Any Pollution / Contaminated Land Remediation Issues				
1. Are contaminated soil removed and replaced to its original form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is there any discernible smell and/or soil discoloration that could indicate a pollution?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are there any other pollution affecting the site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Performance				
1. Are all Environmental Close Out Reports – completed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are there any respective Incident not yet closed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are there any other issue with neighboring plots?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Settlement of Environmental Performance Deduction – if any	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Comments – if any?				
Supporting Photographs (Please reference photographs according to ledger)				

Fire				
Reviewed By:		Date:		
Description	Yes	No	NA	Comments
Management				
1. Building specification and use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Copy of fire service contract	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Copy of QCD final approvals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Soft and hard copy of fire service approved drawings including as built (if there is).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Soft copy of fire detection systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Copy of fire service inspection and maintenance agreement (if there is).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Property management and contact number (if there is).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Additional Comments – if any?				
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Supporting Photographs (Please reference photographs according to ledger)	

ENDORSEMENTS		
<i>The contents of this Developers Handover Checklist are hereby endorsed by:</i>		
<i>Safety Representative</i>		<i>DATE</i>
<i>Environmental Representative</i>		<i>DATE</i>

<i>Fire Prevention Representative</i>		<i>DATE:</i>
<i>HSE Lead</i>	<i>DATE</i>