



## Development Record Drawing 1st Submission Checklist

Please complete following checklist and attach the completed checklist with submission. Please be advised that an incomplete submission will be returned.

Town assigned drawing numbers and infrastructure inventory IDs form part of the "Record" first submission requirement. Please obtain this information prior to making your first submission. E-mail your request to [asbuilt@richmondhill.ca](mailto:asbuilt@richmondhill.ca).

PROJECT NAME: \_\_\_\_\_

PHASE / D06 / 19T / 65M: \_\_\_\_\_

RECORD CHECKLIST	To be completed by Applicant	Town Use Only (Acceptable?)					
		YES	NO				
<i>Provide a check mark to show that the requirement has been completed.</i>							
Submitting a complete drawing set with all design sheets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>A. Title / Cover Sheet shall clearly indicate:</b>							
• Developer / Owner's Name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Project Name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Phase (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Name of Consulting Engineering Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• 19T number(s) / D06 number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• 65M Plan number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>B. Drawing Index (please e-mail for complete list as noted above.)</b>							
• Drawing numbers revised to the Town assigned drawing numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>C. Title and Revision Block on all drawings shall clearly indicate:</b>							
• 19T number(s) / D06 number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• 65M Plan number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Benchmark Description	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Town assigned drawing number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Revision block: Indicate "Record" with the date and initials of the individual making the revisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Revise Signature Block as shown below: <table border="1" data-bbox="190 1895 966 2158" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; text-align: center; vertical-align: middle;">P.Eng. Sealed Sign &amp; Date RECORD</td> <td style="padding: 5px;">                             CONSULTANT                              Issued for Construction  <u>Originally sealed and signed by:</u>                              &lt;insert name&gt;, P.Eng. <span style="float: right;">&lt;insert date&gt; Date</span> </td> </tr> <tr> <td></td> <td style="padding: 5px;">                             REVIEWED BY:  <u>Originally signed by:</u>                              &lt;Insert Name&gt; <span style="float: right;">&lt;Insert date&gt; Date</span>                              Commissioner of Engineering                              and Public Works                         </td> </tr> </table>	P.Eng. Sealed Sign & Date RECORD	CONSULTANT Issued for Construction <u>Originally sealed and signed by:</u> <insert name>, P.Eng. <span style="float: right;">&lt;insert date&gt; Date</span>		REVIEWED BY: <u>Originally signed by:</u> <Insert Name> <span style="float: right;">&lt;Insert date&gt; Date</span> Commissioner of Engineering and Public Works	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
P.Eng. Sealed Sign & Date RECORD	CONSULTANT Issued for Construction <u>Originally sealed and signed by:</u> <insert name>, P.Eng. <span style="float: right;">&lt;insert date&gt; Date</span>						
	REVIEWED BY: <u>Originally signed by:</u> <Insert Name> <span style="float: right;">&lt;Insert date&gt; Date</span> Commissioner of Engineering and Public Works						
<b>D. Relevant Drawings shall clearly indicate:</b>							
• Street Names and Suffixes in accordance with M-plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• Town assigned infrastructure inventory ID numbers (all manholes, valve chambers and hydrants)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• "Record" sewer pipe size, lengths, slope and materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• "Record" manhole size, material and invert elevations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
• "Record" rear lot catchbasin pipe size, length, slope and materials including inlet and invert elevations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

RECORD CHECKLIST	To be completed by Applicant	Town Use Only (Acceptable?)	
		YES	NO

Provide a check mark to show that the requirement has been completed.

**D. Relevant Drawings shall clearly indicate (Continued):**

• Double lines on the plan and profile for sewers 900mm or greater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• "Record" service lateral inverts for all services at street line	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• "Record" data shall be consistent on all drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Provide a minimum of two horizontal dimension ties between all watermain valve chambers from the nearest surface features (i.e. light standard, hydrant, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Provide horizontal dimension ties between all water boxes across the frontage of all lots	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Revise and re-word all design and construction notes to reflect the "Record" state as example below: "Existing manhole to be removed" ---» "Existing manhole removed" "Existing road grade" ---» " Original Grade"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• If the storm sewer has been constructed flatter than designed and is surcharging, provide the revised 25 year storm hydraulic grade line on the profile and enclose a letter certifying that basements will be protected up and including the 25 year storm event.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**E. Design Sheets shall clearly indicate:**

• Project Name	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Phase (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Name of Consulting Engineering Company	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• 19T number(s) / D06 number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• 65M Plan number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Revise pipe size, lengths and slopes as per "Record" information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• If the sewer has been constructed flatter than designed and is surcharging, indicate the pipe and quantify in the comment column.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Town assigned design sheet number(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Town assigned drawing number(s) for referencing drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Town assigned infrastructure inventory ID numbers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Applicant's Contact information**

Consulting Engineering Company:

Contact Person:

Phone Number:

**Town Use Only - Comments**

---



---



---



---



---



---



---



---



---



---