|  |  |  |  |
| --- | --- | --- | --- |
| PRE-DEMOLITION CONFERENCE AGENDA | | | |
| *The items in the following agenda are minimum requirements that should be covered during the conference. The agenda may be used as is or as a base to develop a customized agenda.* | | | |
| Project Number: |  | Resident Engineer: |  |
| Project Code (SA): |  | Project Engineer: |  |
| Location: |  | Contractor: |  |
| Date: |  | Superintendent: |  |
| Time: |  | Foreman: |  |
| I. Attendance Roster | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) | | | |
| I. Attendance Roster (continued) | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |
|  | | | |
| Name: |  | Office Number: |  |
| Representing: |  | Fax Number: |  |
| Street Address: |  | Cell Number: |  |
| City, State, Zip: |  | E-Mail Address: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) | | | |
| II. Project Organization and Status | | | |
| A. Colorado Department of Transportation Personnel: | | | |
| 1. Personnel in Charge at Site: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 2. Assistant-in-Charge (when personnel identified in A.1 is not present): | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 3. Inspector/Duties: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 4. Inspector/Duties: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 5. Inspector/Duties: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 6.: Tester: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 7. Other: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 8. Other: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| Comments: | | | |
| B. Contractor Personnel: | | | |
| 1. Project Superintendent: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 2. Demolition Company Superintendent:/Foreman | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 3. Contractor’s Engineer: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 4. Traffic Control Supervisor: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |
| 5. Other: | | | |
| Name/Title: |  | Fax Number: |  |
| Office Number: |  | Home Number: |  |
| Mobile Number: |  | E-Mail Address: |  |

|  |
| --- |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) |
| III. Scheduling |
| A. Demolition Schedule: |
| 1. Demolition is scheduled for: |
| 2. Anticipated duration of demolition: |
| 3. Detailed schedule complies with working hour restrictions? |
| 4. If all girders in any one span cannot be removed in a shift, how will the Contractor ensure stability of the remaining structure? |
| 5. If all spans of a multi span structure cannot be removed in a single shift, how will the Contractor ensure the stability of the remaining structure? |
| B. Utilities: |
| 1. Has the Contractor verified that Power Lines will not interfere with demolition operations? Comments: |
| 2. Has the Contractor verified the location of underground utilities? |
| C: Equipment Delivery: |
| Demolition equipment will arrive at: |
| D. Contractor’s Engineer: |
| 1. The Contractor’s Engineer shall inspect and provide written approval of each phase of demolition prior to allowing vehicles or pedestrians below or adjacent to the bridge. Comments: |
| E. Other Scheduled Items: |
| Other scheduling items that will affect the start of the demolition process include: |
| 1. Lighting necessary: |
| 2. Railroad Coordination: |
| 3. Utility Coordination: |
| 4. Agency Coordination: |
| 5. Other: |

|  |
| --- |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) |
| IV. Special Provision Requirements |
| *The following Special Provisions are reviewed and discussed below:* |
| A. Special Provision: |
| Comments: |
| B. Special Provision: |
| Comments: |
| C. Special Provision: |
| Comments: |
| D. Special Provision: |
| Comments: |
| E. Special Provision: |
| Comments: |
| F. Special Provision: |
| Comments: |
| G. Special Provision: |
| Comments: |
| H. Special Provision: |
| Comments: |

|  |
| --- |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) |
| V. Plan Notes and Unusual Requirements |
| *The following plan notes and unusual requirements, experimental features, research items, and other unusual requirements are reviewed and discussed below:* |
| A. Plan Note: |
| Comments: |
| B. Plan Note: |
| Comments: |
| C. Plan Note: |
| Comments: |
| D. Plan Note: |
| Comments: |
| E. Other Requirement: |
| Comments: |
| F. Other Requirement: |
| Comments: |
| G. Other Requirement: |
| Comments: |
| H. Other Requirement: |
| Comments: |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) |
| VI. Pre-Demolition Inspections |
| A. Falsework: |
| 1. Are falsework drawings required per section 202 of the Project Special Provisions? |
| 2. If falsework drawings are required, the Contractor's Engineer must certify in writing to the Project Engineer  that falsework materials and construction are in conformance with the falsework drawings submitted to the Project  Engineer prior to commencement of work, in accordance with subsection 601.11 of the *Standard Specifications*. Comments: |
| VII. Demolition Plan and Procedures |
| A. Demolition Plan: |
| Has demolition plan been submitted as required? Comments: |
| 1. Have minimum requirements been incorporated into the demolition plan? |
| * 1. Removal Sequence? |
| * 1. Equipment Descriptions? |
| * 1. Temporary falsework, bracing and shoring? |
| * 1. Protective covering details? |
| * 1. Protection of live waterways?      1. Turbidity?      2. Sedimentation?      3. pH?      4. Wetlands? |
| * 1. Fugitive Dust Mitigation |
| * 1. Dismantling, loading, and hauling details? |
| * 1. Hazmat? |
| 2. Plan stamped by Contractor’s Engineer? |
| 3. Final plan to be submitted to Project Engineer on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| PRE-DEMOLITION CONFERENCE AGENDA (continued) |
| B. Demolition Plan Deviation: |
| If the Contractor is required to deviate from the demolition plan, prior approval from the Contractor’s Engineer to make the revision must be discussed (i.e. schedule and related impacts) with the Project Engineer. Comments: |
| C. Method of Communication: |
| What method of communication will be used between the Contractor, the demolition subcontractor, the Contractor’s Engineer, and the Project Engineer on the job site, during demolition? Comments: |
| **D. Weather :** |
| Does the Contractor have a contingency plan for inclement weather? |
| The Contractor will confirm weather forecast 24 hours prior to demolition. Comments: |
| IX. Safety Requirements |
| A. Safety Plan: |
| 1. Has the Contractor provided for work site safety in accordance with the Occupational Safety and Health Administration requirements (e.g., hardhats, handrails, safety belts, nets)? Comments: |
| 2. Suggested safety topics:  Appropriate equipment (type and size)?  Never stand or walk under structure once demolition has begun.  Do working hour limitations allow sufficient time for the Contractor’s demolition sequence? |
| 3. Time and place of demolition safety meeting? |
| X. Traffic Control |
| A. MHT |
| 1. Will the equipment delivery require traffic control? Describe MHT |
| 2. Will the debris removal require traffic control? Describe MHT |
| 3. Will the demolition require traffic control? Describe MHT |
| 4. Has the Method of Handling Traffic been submitted and approved? |
| 5. Method to prevent traffic (vehicular and others) from entering workzone? |
| 6. Public relations notified? |
| 7. Verify vertical and lateral clearances after demolition and notify Staff Maintenance if necessary. |
| Additional comments: |