### Checking process for generic TMPs

*This form, or a similar company record, must be completed prior to set up of a worksite where a generic TMP is used.*

#### Location details

<table>
<thead>
<tr>
<th>Road name(s):</th>
<th>House number/RP(s):</th>
<th>Suburb:</th>
<th>Generic TMP reference no.:</th>
</tr>
</thead>
</table>

#### Category

<table>
<thead>
<tr>
<th>Category</th>
<th>Points to consider</th>
<th>Y</th>
<th>N</th>
<th>Comment/Mitigation</th>
</tr>
</thead>
</table>

**Road level**

- Is this at the correct road level?

**Shape**

- Are the following catered for in the generic TMP?
  - Intersections
  - Vertical Curves (hills)
  - Horizontal Curves (corners)
  - Sufficient advance warning

**Direction and protection**

- Check that there is:
  - Sufficient length to place the planned direction and protection
  - Sufficient road width to place the planned direction and protection ie minimum lane width is 2.75m
  - Adequate sight distance on both sides
  - Sufficient room to accommodate required positive traffic control

**Proposed speed restrictions**

- Is a TSL required?
  - Refer to the TSL decision matrix in CoPTTM (section E Appendix B)

**Plant and equipment**

- Will your plant and equipment fit within the designated safety areas?

**Personal safety**

- Are all workers able to carry out their work within the designated work zone safety areas?
  - If not are they covered by the rules for inspections?

**Layout diagrams**

- Is diagram detailed in the generic TMP?
  - Does the diagram match the written section of the TMP?

**RCA notification**

- Has the RCA been notified?

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#### Completed by:

| STMS/TC in charge of worksite (All names to be entered before site set-up) |
|-----------------------------|---------------------|---------------------|---------------------|---------------------|
| Name                        | Signature           | Date                | Qualification       | ID number           |
|                             |                     |                     |                     |                     |
| Name                        | Signature           | Date                | Qualification       | ID number           |