FORM 5B-1
Design Quality Audit Form

Submittal: Final

Discipline: Roadway

Segment/ Element: Seg 1B

Document Name: NDC-059 Composite QC

Originator: DGE, SNO, CK, ZH

Company: Wood

Remarks:

QA Completion

- ☑ All comments have been addressed
- ☑ Correct Color Code used
- ☑ Check Print Stamp is complete
- ☑ Documents are updated per comments
- ☑ Check Prints saved to correct folder

I verify that the I-405 QA/QC Procedures have been followed and all necessary QA/QC documentation have been submitted.

Auditor Name: Doug Peters

Company: Wood

Signature:

Date: 2022-01-07