

TERRACROSS™ BRIDGE FIELD INSTALLATION INSPECTION

Unit #'s _____
 Inspection Location: _____
 Inspected By: _____
 Inspection Date: _____



OVERALL INSTALLATION:	Checked
1) PROPER CROSSING LOCATION PER ACCESS PLAN	
2) OVERALL SPAN DOES NOT EXCEED MAXIMUM SPAN ALLOWABLE (REFER TO USERS GUIDE)	
3) BRIDGE SHALL BE LEVEL INSPAN AND SIDE TO SIDE (ADJUST BEARING MATS HEIGHT AS REQUIRED)	
4) TRANSITIONS FILLED - (OPTIONS: MATTING, ROCK, SOIL BUILD UP)	
5) BEARING MATS SHALL BE ON A FLAT-LEVEL SURFACE (PREP GROUND AS REQUIRED)	
6) BEAMS PROPERLY PEGGED TO BEARING MAT AND STABLE	
CRIBBING/BANK SUPPORT:	
7) CRIBBING IS STABLE WITH NO RISK OF EROSION OR DECAY (ENTER N/A IF NO CRIBBING)	
7a) CHECK THIS BOX IF CRIBBING WAS STERLING DESIGN	
7b) CHECK THIS BOX IF CRIBBING ENGINEERING WAS PROVIDED	
8) OTHER (SPECIFY) _____	
HAND RAILS (NOTE: MUST BE INSTALLED):	
9) ALL HAND RAILS INSTALLED - FULL SPAN/BOTH SIDES	
10) LEGS SEATED PROPERLY INTO THE RAIL SLOTS	
11) OTHER (SPECIFY) _____	
DECKING MATS AND CURBS:	
12) CLT/BEARING MATS - GOOD CONDITION	
13) DECKS AND CURBING STABLE, NO GAPS (MINIMIZED)	
14) OTHER (SPECIFY) _____	
GEO-FABRIC (IF REQUIRED):	
15) COMPLETE COVERAGE - NO GAPS, TEARS	
16) OTHER (SPECIFY) _____	
POST INSTALLATION PHOTO'S AND SIGNATURE	
17) POST INSTALLATION PHOTOGRAPHS TAKEN (SEND TO JERRY BARDESON)	

18) INSTALLER SIGNATURE: _____

19) DATE: ____/____/____

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