DESIGN REQUEST FORM: NOISE CONTROL WALL

CONTROLHIRE STRUCTURAL ENGINEERING DEPARTMENT

GENERAL DETAILS

Company/Organisation

Contact Name

Contact Number

Contact Email

Site Reference & Location

Wall Installation Date

Duration

NOISE CONTROL WALL DETAILS

Length - Total*(LinealMetres)*

Height/s

Gate Required ☐ Yes ☐ No

Ground Level/Stability Notes

Machinery available?
(eg telehandler, forklift, all-terrain forklift, excavator, boom lift)

Site Access Description

SITE AND NOISE CONTROL WALL MARK UP

NOTES

CONTROL HIRE - INTERNAL USE ONLY

Engineering Sign-Off Required: ☐ Yes ☐ No

Blocks on work side or public side:

Special Instructions: