

Pre-construction Information Record

A pre-construction information register with existing records, site constraints, significant risks, information gaps, recipients and issue revisions.

1. Record details and scope

Project

Filled in from the project in SiteSurvey.

Site or premises address

Client or organisation

Record date *

Person completing the record *

This is an information register and gap record. It does not replace the underlying surveys, drawings, existing health and safety file or competent design coordination.

Under CDM 2015 in Great Britain, the commercial client provides relevant pre-construction information to designers and contractors. HSE describes the principal designer role in helping assemble it and providing the information others need to carry out their duties. The information must suit the project rather than being a generic document bundle.

2. Project and responsibilities

Project scope and intended work *

Client contact responsible for information *

Principal designer or coordinating designer

Existing use, occupants and neighbouring activities

Information issue and revision

3. Information register

Information item (copy this block for each one)

Subject or risk addressed *

Document, drawing or survey reference

Revision and date

Availability * (choose one)

☐ Available ☐ Requested ☐ Missing ☐ Not applicable

Scope, reliability and limitations *

Person supplying or resolving it

Required-by date

4. Constraints and gaps

Access, services, asbestos, structure and other significant constraints *

Information gaps, implications and controls before work

State what information is missing, why the work needs it and who will obtain it. Do not record an assumption as a confirmed survey result.

Design coordination and contractor questions

5. Issue record

Recipient (copy this block for each one)

Designer or contractor receiving information *

Information package and revision *

Date issued

Acknowledgement, questions or further information needed

6. Actions and review

Are further actions required? * (choose one)

☐ Yes ☐ No

Further action (copy this block for each one; if applicable)

Action and evidence reference *

Person responsible *

Target date

Action status * (choose one)

☐ Open ☐ In progress ☐ Completed

Completion evidence * (if applicable)

Outstanding limitations and information to pass on

Record status * (choose one)

☐ Ready for review ☐ Further work needed ☐ Work or use stopped

Reviewed by

Review date

Author signature *



Signing records the information entered. It does not itself certify legal compliance, remove a limitation or authorise unsafe work.