Include the following information on each Working Drawing. See DCSM sections 2.3 and 2.6 for additional details on drawings.

**Instructions**:

Indicate your response to each item in the checklist. Select ‘Yes’ if the checklist item has been completed in full. Select ‘No’ or ‘N/A’ if that item is not included or not required for the specific project. Explain why that item has not been included in the submittal.

| **RESPONSE** | **REQUIREMENTS** |
| --- | --- |
| Choose an item. | Provide the project title. |
| Choose an item. | Provide the project location. |
| Choose an item. | Provide the 11-digit state project code. |
| Choose an item. | Provide a drawing or sheet title for each. |
| Choose an item. | Provide a drawing or sheet number that is unique. |
| Choose an item. | Provide the name of the A/E for the project. |
| Choose an item. | Show the professional seal(s) of the responsible licensed professional(s) without signatures and dates. |
| Choose an item. | Provide the uniform date of the completed documents. |