| | 7 | 1 |
|--|-------------------------------------|------------|
| 00 1000 | VUALICY | |
| | COTITION | Control |
| | Quality Coult of Check Report | |
| | Kepot. | |
| | Stage: | 2 |
| The second secon | Stage: After Co | 1 |
| - | umno | |
| | Stage: After Column Casting (VIIIas | 1 |
| *************************************** | VIIIa | (· • 11 - |

| Block No. 180 Column No. 02 Sl. No. 32757 | | | | | | |
|--|---|--|--|--|----------|------------|
| Project Sign Sign Niley at the Phase Sign Sign Date Out no. Sign MD Sign MD Sign Report filed and signed by PM? ork. Submit ATR on QC report to QC team. Proceed only after recheck by QC. ork. Proceed with work after submitting ATR on QC report to QC team. further work. ATR not required. | | | Column No. | 02 | SI. No. | 32757 |
| Sign Date Date Sign Court no. ATR on QC report to QC team. For filling For filling For filling Court no. For filling F | | | Project | erta | Phase | D |
| Sign Sign Sign Date On Sign MD Sign MD Sign Report filed and signed by PM? Tork. Submit ATR on QC report to QC team. Proceed only after recheck by QC. ork. Proceed with work after submitting ATR on QC report to QC team. further work only after making corrections pointed out in the QC report. ATR not required. urther work. ATR not required. | Ć. | 3 | Sign | 12.0 | Date | 29/1/19 |
| on 32604 Report filed and signed by PM? on MD Sign For filling ork. Submit ATR on QC report to QC team. Proceed only after recheck by QC. ork. Proceed with work after submitting ATR on QC report to QC team. further work only after making corrections pointed out in the QC report. ATR not required. | | | Sign | | Date | 29/1/19 |
| on MD Sign For filling Cork. Submit ATR on QC report to QC team. Proceed only after recheck by QC. ork. Proceed with work after submitting ATR on QC report to QC team. Further work only after making corrections pointed out in the QC report. ATR not required. | Previous stage report no. | | 32604 | Report filed and signe | d by PM? | VYcs □No |
| : ork. Submit ATR on QC report to QC team. Proceed only after recheck by QC ork. Proceed with work after submitting ATR on QC report to QC team. Further work only after making corrections pointed out in the QC report. ATR further work. ATR not required. | Checked By MD on | | MD Sign | | | ☐ Yes ☐ No |
| | Recommendation: Stop further work. Submit A. Stop further work. Proceed v Proceed with further work on Proceed with further work. A | TR on QC revith work after making the requirement of the requirement o | port to QC team. Procer submitting ATR on ing corrections pointed. | eed only after recheck b QC report to QC team. d out in the QC report. A | | |

Notes:

- 1. Inspection should be done after easting of columns at each stage and before starting centering works for each slab.
- Prepare Columns Position Check Plan as follows:
- Divide blocks into smaller sub-blocks.
- Show size and orientation of columns. (Tolerance 0.5")
- ည်းငှ Show inner - inner space between columns. (Tolerance 1")
- Show diagonals for 20% of bays. (Tolerance 1.5")
- Print an A3 size plan.

| Olah Dimanaiana Otta-1 | Columns Position Check Plan enclosed? | 3. Chele vacu correct dimension with green colour. Circle each incorrect dimension with red colour and mention activ |
|------------------------|---------------------------------------|--|
| | □ Wes □ No | offect dimension with red colour and mention actual dimension next to it. |

Stab Dimensions Check.

Notes:

- 1. Prepare Slab (or plinth beams) Dimensions Check Plan as follows:
- Show outer dimensions of slab. (Tolerance 2")
- Show length and width of balconies (Tolerance 1") Show inner dimensions of ducts and lift well. (Tolerance 1")
- Show location of sunken slab.
- Print an A3 size plan. each correct dimension with
- .

| Specified thickness of slab? | Slab Dimensions Check Plan enclosed? | 2. Circle each correct dimension with green colour. Circle each incorrect dimension with red colour and mention a |
|--------------------------------|--------------------------------------|---|
| Actual thickness of slab? ,5 " | ☑Yes □ No | ctual dime |
| | | nsion next to it. |

| Are the honey combs is slab and columns | Number and size of honey combs? | Quanty of starters? | One lite. S. Jou bending and concreting? | 1 | eck Repot. |
|---|---------------------------------|---------------------|--|------------------|-----------------|
| [] High [VMedium []] | ☐Good ☐Avg. ☐ Bad | Good Avg. Bad | | Casting (villas) | Stage: After C. |

| Distance of tap from furthest distance that requires curing. (max permitted 100°) Frequency of curing in number of times a day (enquire from labourers) Is the pressure in the curing pipe more than 15' head? Quality of infrastructure for curing. Quality of infrastructure for curing. | Bund size is less than 100 sft? Drum (200 lts) provided for curing? Gunny bags used for column curing? | Curing. Bunds for curing made on slah? | or deflected in the slab by more than 1" numbered for testing? | |
|--|--|--|--|---|
| | | | Avg. Bad | Good NAvg. ☐ Bad High NMedium. ☐ Low |

Columns height, plumb, steel & level marking check.

Mark V for correct or minor mistake which does not require correction
 Mark X for minor mistake that requires minor correction.
 Mark XX for major mistake that requires correction by replacement or re-fixing.
 Tolcrance: Plumb 0.25"

| 16. 17. 18. 19. 20. | S No 1. 2. 2. 3. 3. 4. 4. 4. 11. 11. 11. 12. 13. |
|---|---|
| | 22 2 2 2 2 2 2 3 8 8 8 8 9 00 No. |
| | C 2 2 C C C C C C C C C C C C C C C C C |
| | Spec. Spec. Spec. 1.1. 8 1.1. 8 1.1. 1.1. 8 1.1. 1.1. 8 1.1. |
| | Col No. Col type Height in ft Steel (~ or x) |
| | Stee |
| | ght by more than 1 Steel (v or x) of Size of Size of v v v v v v v v v v v v v v v v v v v |
| | Honeycombs Ave |
| | Si |
| | Plumb (vor x) de 1 Side 2 |
| ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ Yes ☐ ☐ Yes ☐ ☐ Yes ☐ ☐ Yes | S S S S S S S S S S S S S S S S S S S |
| No No | Om Cce level On O |