

Quality Control Check Report Stage: After Column Casting (Villas)

Block No.	27	Column No.	01	Sl. No.	32301
Company	AGH	Project		Phase	---
Prepared by	V. Sanketh	Sign	V. Sanketh	Date	06/12/18
Project Manager	Zakir Hussain	Sign	Zakir	Date	06/12/18
Previous stage report no.	32169	Report filed and signed by PM?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Checked By MD on	MD Sign	For filling	<input type="checkbox"/> Yes <input type="checkbox"/> No		

- Recommendation:
- Stop further work. Submit ATR on QC report to QC team. Proceed only after recheck by QC.
 - Stop further work. Proceed with work after submitting ATR on QC report to QC team.
 - Proceed with further work only after making corrections pointed out in the QC report. ATR not required.
 - Proceed with further work. ATR not required.

Columns Position Check

Notes:

- Inspection should be done after casting 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")
 - Show inner - inner space between columns. (Tolerance 1")
 - Show diagonals for 20% of bays. (Tolerance 1.5")
 - Print an A3 size plan.
- Circle each correct dimension with green colour. Circle each incorrect dimension with red colour and mention actual dimension next to it.

Columns Position Check Plan enclosed?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Slab Dimensions Check

Notes:

- 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.
- Circle each correct dimension with green colour. Circle each incorrect dimension with red colour and mention actual dimension next to it.

Slab Dimensions Check Plan enclosed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A	
Specified thickness of slab?	---	Actual thickness of slab?	---

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Quality of centering, rod bending and concreting.	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Avg. <input type="checkbox"/> Bad
Quality of centering, rod bending and concreting?	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Avg. <input type="checkbox"/> Bad
Quality of starters?	<input type="checkbox"/> High <input checked="" type="checkbox"/> Medium. <input type="checkbox"/> Low
Number and size of honey combs?	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Avg. <input type="checkbox"/> Bad
Are the honey combs is slab and columns packed?	
Number of beams that are sagging, bulging, caved or deflected in the slab by more than 1"	
Have 6 cubes each for columns and slab casted and numbered for testing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Remarks:	

Curing.

Bunds for curing made on slab?	<input type="checkbox"/> Yes <input type="checkbox"/> No	NA
Bund size is less than 100 sft?	<input type="checkbox"/> Yes <input type="checkbox"/> No	-
Drum (200 lts) provided for curing?	<input type="checkbox"/> Yes <input type="checkbox"/> No	-
Gunny bags used for column curing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Distance of tap from furthest distance that requires curing: (max permitted 100')		30'-0"
Frequency of curing in number of times a day (enquire from labourers)		2 times
Is the pressure in the curing pipe more than 15' head?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Quality of infrastructure for curing.	<input checked="" type="checkbox"/> Good <input type="checkbox"/> Avg. <input type="checkbox"/> Bad	
Remarks:	1) Gunny bags not provided for columns. 2) No. Circular column completely not casted.	

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Columns height, plumb, steel & level marking check.

Notes:

1. Mark ✓ for correct or minor mistake which does not require correction
2. Mark ✗ for minor mistake that requires minor correction.
3. Mark ✗✗ for major mistake that requires correction by replacement or re-fixing.
4. Mark ✗✗✗ for major mistake that cannot be corrected.
5. Tolerance: Plumb 0.25"
6. Circle actual height of columns if level differs from specified height by more than 1".

S No	Col No.	Col type	Height in ft		Steel (✓ or ✗)		Honeycombs	Plumb (✓ or ✗)		Reference level marked on column?
			Spec.	Actual	No of rods	Size of rods		Side 1	Side 2	
1.	A1	C2	8'-7"	8'-7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	A3	C2	8'-7"	8'-5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	A4	C1	8'-7"	8'-6"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	B1	C1	8'-7"	8'-6 1/2"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	B2	C2	stairs	stairs	✓	✓	✓	✓	✓	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	B3	C2	stairs	stairs	✓	✓	✗	✓	✓	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	B4	C1	8'-7"	8'-6"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	C1	C2	8'-7"	8'-4"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	C2	C2	8'-7"	8'-6"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	C3	C2	8'-7"	8'-5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	C4	C1	8'-7"	8'-5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	D1	C3	10'-7"	-	✓	✓	✗	✗	✗	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	D2	C2	8'-7"	8'-6"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	D4	C1	8'-7"	8'-7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.										<input type="checkbox"/> Yes <input type="checkbox"/> No
16.										<input type="checkbox"/> Yes <input type="checkbox"/> No
17.										<input type="checkbox"/> Yes <input type="checkbox"/> No
18.										<input type="checkbox"/> Yes <input type="checkbox"/> No
19.										<input type="checkbox"/> Yes <input type="checkbox"/> No
20.										<input type="checkbox"/> Yes <input type="checkbox"/> No