

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

Block No.	49	Column No.	08	Sl. No.	34810
Company	Ask	Project	DR Substation	Phase	
Prepared by	ESWAR KIRAN	Sign	<i>[Signature]</i>	Date	28.11.23
Project Manager	Zairi	Sign	<i>[Signature]</i>	Date	28.11.23
Previous stage report no.		Report filed and signed by PM?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Checked By	MID on	MID Sign	3481	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 mark an arrow pointing dimension next to it.
- Columns Position Check Plan enclosed? Yes No

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 fin 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? Yes No

Specified thickness of slab?	5	Actual thickness of slab?	5
------------------------------	---	---------------------------	---

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

Quality of centering, rod bending and concreting.

Quality of centering, rod bending and concreting?

Quality of starters?

Number and size of honey combs?

Are the honey combs in 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?

Remarks:

Good Avg. Bad

Good Avg. Bad

High Medium. Low

Good Avg. Bad

Yes No

Curing.

Bunds for curing made on slab?

Band size is less than 100 sft?

Drum (200 ltr) provided for curing?

Gunny bags used for column curing?

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.

Remarks:

Yes No

Yes No

Yes No

Yes No

20-30'

4 times

Yes No

Good Avg. Bad

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

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 minor mistake that requires correction by replacement or re-fixing.
4. Mark ✗✗✗ for major mistake that cannot be corrected.
5. Tolerance: Plumb 0.25"
6. Check actual height of columns if level differs from specified height by more than 1"

S No	Col No.	Col type	Spec.	Height in ft	Actual	Steel (✓ or ✗)	Honeycombs	Plumb (✓ or ✗)	Side 1	Side 2	Reference level marked on column?
1.	F1	C2	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	F3	C2	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	F5	C1	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	F1	C1	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	B4	C2	S-T	S-T	S-T	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	B3	C2	S-T	S-T	S-T	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	B5	C1	Q-T	8-6	8-6	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	C1	C2	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	C2	C2	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	C5	C1	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	D1	C3	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	D2	C2	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	D5	C1	Q-T	8-7	8-7	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	C1	C2	Q-T	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