

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

Block No.	16	Column No.	01	Sl. No.	31236
Company	NOC (LIP)	Project	NOC	Phase	—
Prepared by	P. Sri Kumar	Sign	P. Sri Kumar	Date	22/8/18
Project Manager	A. Suresh	Sign		Date	22/8/18
Previous stage report no.			Report filed and signed by PM?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Checked By MD on		MD Sign	30#68	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:

1. Inspection should be done after casting of columns at each stage and before starting centering works for each slab.
2. Prepare Columns Position Check Plan as follows:
  - a. Divide blocks into smaller sub-blocks.
  - b. Show size and orientation of columns. (Tolerance 0.5")
  - c. Show inner – inner space between columns. (Tolerance 1")
  - d. Show diagonals for 20% of bays. (Tolerance 1.5")
  - e. Print an A3 size plan.
3. Circle each correct dimension with green colour. Circle each incorrect dimension with red colour and mention actual dimension next to it.

**Slab Dimensions Check**

Notes:

1. Prepare Slab (or plinth beams) Dimensions Check Plan as follows:
    - a. Show outer dimensions of slab. (Tolerance 2")
    - b. Show length and width of balconies. (Tolerance 1")
    - c. Show inner dimensions of ducts and lift well. (Tolerance 1")
    - d. Show location of sunken slab.
    - e. Print an A3 size plan.
  2. 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 | Actual thickness of slab? | — |
| Specified thickness of slab?         |  | Actual thickness of slab? | — |

**Quality Control Check Report. Stage: After Column Casting (villas)**

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 type="checkbox"/> Good <input checked="" 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?	<input type="checkbox"/> Good <input checked="" type="checkbox"/> Avg. <input type="checkbox"/> Bad
Number of beams that are sagging, bulging, caved or deflected in the slab by more than 1"	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Have 6 cubes each for columns and slab casted and numbered for testing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Remarks: Not a Reference level (3'.3") not marked on four sides of column, only one side marked by site-engineer (Usay).

**Curing**

Brands for curing made on slab?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA
Brand size is less than 100 sft?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> —
Brand (100 lbs) provided for curing?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> —
Gunny bags used for column curing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Distance of tap from furthest distance that requires curing. (max permitted 100')	<u>20.0''</u>
Frequency of curing in number of times a day (enquire from labourers)	<u>2 times</u>
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:	

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 X for minor mistake that requires minor correction.
3. Mark XXX for major mistake that requires correction by replacement or re-fixing.
4. Mark XXXX 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 X)	Size of rods	Honeycombs	Plumb (✓ or X)		Reference level marked on column?
			Spec.	Actual				Side 1	Side 2	
1.	A1	C1	8'.7"	8'.6"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
2.	A2	C2	8'.7"	8'.7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
3.	A4	C1	8'.7"	8'.7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
4.	B1	C2	Staircase	Staircase	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.	B2	C3	8'.7"	8'.7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6.	P.14	C2	8'.7"	8'.8"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.	C1	C4	14.0000	14.0000	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.	C2	C2	8'.7"	8'.7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	C4	C1	8'.7"	8'.8"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	D.	C2	8'.4"	8'.5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.	D3	C2	8'.4"	8'.5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.	D4	C1	8'.7"	8'.7"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.	E-	C5	8'.4"	8'.5"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.	E3	C1	8'.4"	8'.4"	✓	✓	✓	✓	✓	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	E4	C1	8'.4"	8'.4"	✓	✓	✓	✓	✓	<input checked="" 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