| **DOTLOGO2.TIF** | **Contractor** **Daily (QC) Report** |
| --- | --- |
|  |
|  |
| Contractor: |       |  | Date: |       |  | IR#: |       |
| Bridge ID: |       |  | Contractor QC Start Time: |       |  | Stop Time: |       |
| Location: |       |  | Crew Start Time: |       |  | Stop Time: |       |
| Contract No.: |       |  | No. of Workers:  |     |  |
|  |
| **Ambient Conditions** |
| **Location** | Time | Weather | WindMPH | DB°F | WB°F | RH% | ST°F | DP°F | +/- | Comments |
|       |       |       |     |     |     |     |     |     |     |       |
|       |       |       |     |     |     |     |     |     |     |  |
|       |       |       |     |     |     |     |     |     |     |  |
|       |       |       |     |     |     |     |     |     |     |  |
|  |
| **Surface Preparation** |
| No. | Location | Surface Preparation | Surface Profile | Comments |
|  |  | Spec. | Actual | Spec. | Actual |  |
| 1. |       |       |       |       |       |       |
| 2. |       |       |       |       |       |  |
| 3. |       |       |       |       |       |  |
| 4. |       |       |       |       |       |  |
|  |
| If the shop primed steel is being coated, [ ]  OZ, [ ]  IZ, [ ]  Other. Has the surface been water cleaned/Pressure washed? [ ]  Yes [ ]  NoHas BBS 59 or approved shop drawing been received? [ ]  Yes [ ]  NoPrimer manufacturer, trade name and batch number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| **Surface Preparation Checklist** | Acceptable |  | Acceptable |
|  | Yes | No | N/A |  | Yes | No | N/A |
| Laminar/Pack (stratified) rust removed? Damaged areas repaired? | **[ ]**  | **[ ]**  | **[ ]**  | Grease and oil removed? | [ ]  | **[ ]**  | **[ ]**  |
| Is surface free of visible moisture?  | **[ ]**  | **[ ]**  | **[ ]**  | Protective coverings suitable/in-place? | **[ ]**  | **[ ]**  | **[ ]**  |
| Clean and dry abrasive being used (AB2 for recycled abrasive)? | **[ ]**  | **[ ]**  | **[ ]**  | Abrasive tests meet SSPC-AB1/AB3? | **[ ]**  | **[ ]**  | **[ ]**  |
| Compressed air check satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  | Salts removed? (Attach results) | **[ ]**  | **[ ]**  | **[ ]**  |
| Dust, dirt and abrasive removal satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  | Record: Type and size abrasive |  |
| Section loss or holes reported to RE |  | Record: Chalk Rating |  |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bridge ID/Location: |   | Date: |  | IR#: |   |
|  |
|  |
|  |
| **Coating Application** |
| No. | Location | Coating Type | Mix# | Application Time | WFTMils | Comments |
|  |  |  |  | Begin | End |  |  |
| 1. |       |       |       |       |       |      |  |
| 2. |       |       |       |       |       |      |  |
| 3. |       |       |       |       |       |      |  |
| 4. |       |       |       |       |       |      |  |
|  |
| If a shop IZ primer is present, has a mist coat been applied? [ ]  Yes [ ]  No |
|  |
| Mixing Report |
| Mix # | Location | Color | ShelfLife (yr) | Comp ABatch # | Comp BBatch # | Comp CBatch # | Thinner | Mat. °F | Timeof mix | Ind.Time | Pot Life (hr) | Qty (gal) | Witnessed |
|  |  |  |  |  |  |  | Name | % |  |  |  |  |  | Yes | No |
|     |      |       |    |       |       |       |       |    |    |       |       |      |     | **[ ]**  | **[ ]**  |
|     |      |       |    |       |       |       |       |    |    |       |       |      |     | **[ ]**  | **[ ]**  |
|     |      |       |    |       |       |       |       |    |    |       |       |      |     | **[ ]**  | **[ ]**  |
|     |      |       |    |       |       |       |       |    |    |       |       |      |     | **[ ]**  | **[ ]**  |

|  |  |  |  |
| --- | --- | --- | --- |
| Coating Application Checklist | Acceptable |  | Acceptable |
|  | Yes | No | N/A |  | Yes | No | N/A |
| Compressed air check satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  | Protective coverings in place? | **[ ]**  | **[ ]**  | **[ ]**  |
| Surrounding air cleanliness satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  | Intercoat cleanliness satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  |
| Recoat times satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  | Material agitation satisfactory? | **[ ]**  | **[ ]**  | **[ ]**  |
| Application equipment: AS/CS/B/R | **[ ]**  | **[ ]**  | **[ ]**  | Adequate lighting? | **[ ]**  | **[ ]**  | **[ ]**  |
| Stripe coat applied? | **[ ]**  | **[ ]**  | **[ ]**  | Free of application deficiencies? | **[ ]**  | **[ ]**  | **[ ]**  |
| Time - surface prep to coating: |  | **Over spray controls used** |
|  |
| Dry Film Thickness |
| No. | Location | Cumulative DFT Mils (1st coat, 1st/2nd ct, 1st/2nd/3rd cts combined) | Rework Required | Comments |
|  |  | Spec. | Avg. | Range | Yes No |  |
| 1. |       |       |      |       |  [ ]  [ ]  |       |
| 2. |       |       |      |       |  [ ]  [ ]  |  |
| 3. |       |       |      |       |  [ ]  [ ]  |  |
| 4. |       |       |      |       |  [ ]  [ ]  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bridge ID/Location: |   | Date: |   | IR #: |   |
|  |
| Equipment on the Job |
| No. | Equipment Description | No. | Equipment Description |
| 1. |       | 4. |       |
| 2. |       | 5. |       |
| 3. |       | 6. |       |

|  |  |
| --- | --- |
| **Instrument Record** | Comments – Attach additional pages as necessary |
| CalibratedYes No | N/A | Instrument | Brand | SerialNumber |       |
|
| **[ ]**  | **[ ]**  | **[ ]**  | Sling Psychrometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Surface Thermometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Digital Psychrometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Testex Tape & Micrometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Digital Profile Depth Micrometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Conductivity Meter |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Bresle Kit or Chlor\*Test Kit |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Wet Film Gage |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Dry Film Gage |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Certified Calibration Standards |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Measured or Certified Plastic Shims |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Paint Thermometer |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  | Tooke Gage |       |       |
| **[ ]**  | **[ ]**  | **[ ]**  |       |       |       |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Contractor QC Inspector: |       | Date: |       | Received by Resident Engineer/Paint Technician: |       |
|  |
|  |
| Print / Type Name: |       | Type/Print Name: |       |
|  |
|  |
| Signature : |  | Signature: |  |