

Quality Assurance Labs Inc.

NON-DESTRUCTIVE TESTING AND INSPECTION SERVICES

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ULTRASONIC INSPECTION REPORT

CUSTOMER: SW COLE GRAY OFFICE		DATE OF INSPECTION	M	D	Y		
ATTENTION: CRAIG		REPORT No.	10	07	08		
PROJECT: MARRIOTT HOTEL		PAGE	1	OF	1		
COMPONENT INSPECTED: ROOF FRAMING		JOB No.	06-0726				
AREA OF INTEREST: MOMENT CONNECTIONS		P.O. No.	06-0726.2				
COMPONENT LOCATION: PORTLAND ME		INSTRUMENT					
CUSTOMER WORK ORDER No: 06-0726.2	PART No.: N/A	MAKE: PANAMETRICS					
MATERIAL: CARBON STEEL	HEAT No.: N/A	MODEL: LTC					
COMPONENT SURFACE CONDITION: AS WELDED		EQUIPMENT NO.: 35403					
EXAMINATION DATA		MATERIAL THICKNESS: 15.875 mm (0.625 in.)					
Project Code/Spec AWS D1.1		SCREEN RANGE: 10"					
U.T. Procedure No.		U.T. Technique No.		COUPLANT: SONO-CLEAR			
RESULTS: AS NOTED	INDICATIONS: AS NOTED	TRANSDUCERS					
REMARKS: PERFORMED ULTRASONIC INSPECTION ON THE FOLLOWING MOMENT CONNECTIONS IAW AWS D1.1. GRID LINES: C-9 EAST T/B ACCEPTED C-10 EAST & WEST T/B ACCEPTED C-11 EAST & WEST T/B ACCEPTED C-12 WEST T/B ACCEPTED A-10 EAST & WEST T/B ACCEPTED A-11 EAST & WEST T/B ACCEPTED A-12 EAST & WEST T/B ACCEPTED A-13 EAST & WEST T/B ACCEPTED A-14 WEST T/B ACCEPTED RESULTS OF INSPECTION; ACCEPT: ALL REMAINING WELDS UNLESS NOTED NO CRACKS, CRACKLIKE, OR RELEVANT INDICATIONS NOTED. T/B = TOP & BOTTOM. /// LAST ITEM/// <p style="text-align: center;">FAA REPAIR STATION NUMBER RX5R187N METHOD(S),PROCESS(ES),PROCEDURE(S) MERCURY FREE</p>		MAKE: PANAMETRICS		FREQ.: 2.25 MHz		ANGLE: 0°	
		SIZE: 25.4 mm (1.000 in.)		STYLE: SINGLE		SHAPE: ROUND	
		EQUIPMENT No.:		MAKE: PANAMETRICS			
		FREQ.: 2.25 MHz		ANGLE: 70°		SIZE: 12.7 mm (0.500 in.)	
		STYLE: SINGLE		SHAPE: SQUARE			
		EQUIPMENT No.:		MAKE:			
		FREQ.:		ANGLE:			
		SIZE:		STYLE:			
		SHAPE:		EQUIPMENT No.:			
		REFERENCE BLOCKS		MAKE: PANAMETRICS			
		TYPE: IIW					
		MATERIAL: CARBON STEEL					
		EQUIPMENT No.:					
		SENSITIVITY: 58db					
		TRANSFER VALUE:					
ADDITIONAL INFORMATION - SEE ATTACHED: <input type="checkbox"/> SKETCH(ES) <input type="checkbox"/> SUPPLEMENTARY SHEET(S) <input type="checkbox"/> VIDEO		CERTIFICATION		DATE			
SIGNATURES		LEVEL		M	D Y		
INSPECTOR S. Dyer	ASNT	II	10	07	08		
SUPERVISOR							
AUTHORIZED INSPECTOR							
CUSTOMER REPRESENTATIVE							