



Concrete Construction Observation Report

Project Name: Mercy Hospital **Project No:** 06-1069.1
Client: Mercy Hospital **Date:** 3/13/07
Placement Type: Footing Wall Column Slab Other
Placement Location: 1st Floor Deck Slab Line 3 to 5 A-H

<u>PRE PLACEMENT OBSERVATIONS</u>	<u>In Compliance</u>		<u>N/O</u>	<u>Comments</u>
Bar Size (diameter, length, bend and anchorage)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	Wire mesh and rebar
Location (# of bars, spacing, and cover)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	
Splicing (weld joint, overlap)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	
Stability (wiring, chairs, and spacers)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	Chairs used
Reinforcement free from mud, oil, rust, or other nonmetallic coatings	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	Debris cleared
Reinforcement appears in conformance to specifications	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	
Soil subgrade prepared in accordance with project specifications	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	

<u>Referenced Drawings</u>	<u>Date</u>	<u>Page</u>	<u>Rev.</u>	<u>ASTM</u>	<u>GRADE</u>
Barker Steel Slab Reinf. 1 st floor deck	2/9/07	RO2		A 615 <input checked="" type="checkbox"/>	40 <input type="checkbox"/> 50 <input type="checkbox"/> 60 <input checked="" type="checkbox"/>
				A 616 <input type="checkbox"/>	75 <input type="checkbox"/>
				A 617 <input type="checkbox"/>	
				A 706 <input type="checkbox"/>	A 775 Epoxy <input type="checkbox"/>

<u>CONCRETE PLACEMENT OBSERVATIONS</u>	<u>In Compliance</u>		<u>N/O</u>	<u>Comments</u>
Required mix used	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4000 psi
Placement and consolidation of concrete observed	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Placed using Pump
Concrete properly conveyed to all areas of placement	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Depth of layer maximum limits not exceeded	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Internal vibration (depth of insertion, spacing, time, vertical insertion, no conveyance of concrete by vibration)	Yes <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Even layering around openings and embedments	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Removal of temporary ties and spacers	Yes <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

FIELD TESTING OF CONCRETE PERFORMED Yes No
***CYLINDER SET NO:** 702-40, 41, 42, 43, 44 ←*refer to associated concrete test report

<u>POST PLACEMENT OBSERVATIONS</u>	<u>In Compliance</u>		<u>N/O</u>	<u>Comments</u>
Specified finish	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Screed and trowel
Protection of surfaces from cracking due to rapid drying	Yes <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Proper curing procedures implemented	Yes <input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

NON-CONFORMANCE ITEMS OBSERVED Yes No

Non-conformance item description:
 Action taken by SWCE:

N/O = Not Observed ATTACHMENTS Y N
 NOTES:

Polyheed 997 and Pozzutec 20 1% used as admixtures. Debris present from inspection 3/12 cleared by CCB with air compressor. Dragon rep present throughout placement. Slump high on Load 7. Advised Dragon and contractor. Slumps remained consistent after speaking to Dragon Rep. No air in Mix. Air temp 50 degrees.

SWCE REPRESENTATIVE: VLT REVIEWED BY: RED