



Project Name: The Inn at Cedar
Client: JHA Assisted Living
Placement Type: Footing Wall Column Slab Other
Placement Location: Back wall on existing footer, between existing buildings

Project No: 07-0503
Date: 7/18/07

PRE PLACEMENT OBSERVATIONS

	In Compliance		N/O	Comments
Bar Size (diameter, length, bend and anchorage)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	
Location (# of bars, spacing, and cover)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	see notes
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"/>	
Reinforcement free from mud, oil, rust, or other nonmetallic coatings	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	<input type="checkbox"/>	
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"/>	by others

Referenced Drawings	Date	Page	Rev.	ASTM	GRADE
First Floor Foundation Plan, Elevations, Details		RO1		A 615 <input checked="" type="checkbox"/>	40 <input type="checkbox"/> 50 <input type="checkbox"/> 60 <input checked="" type="checkbox"/>
First Floor Sections & Details		RO2		A 616 <input type="checkbox"/> A 617 <input type="checkbox"/> A 706 <input type="checkbox"/>	75 <input type="checkbox"/> A 775 Epoxy <input type="checkbox"/>

CONCRETE PLACEMENT OBSERVATIONS

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

FIELD TESTING OF CONCRETE PERFORMED

***CYLINDER SET NO:** 774-1
 Yes No
 ←*refer to associated concrete test report

POST PLACEMENT OBSERVATIONS

	In Compliance		N/O	Comments
Specified finish	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	
Protection of surfaces from cracking due to rapid drying	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	
Proper curing procedures implemented	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<input checked="" type="checkbox"/>	

NON-CONFORMANCE ITEMS OBSERVED

Yes No

Non-conformance item description:
 Action taken by SWCE:

N/O = Not Observed

NOTES: Discussed change from stepped wall to uniform wall with contractor. Contractor identified from drawings to match existing footer elevations therefore eliminating need for stepped wall. This decision was made by contractor during building.

ATTACHMENTS Y N

SWCE REPRESENTATIVE: Lucy Trellner

REVIEWED BY: RSD