

Project _____

NO.	STANDARD	CHECK	REMARKS
A DESKTOP STUDY			
1	Shop drawings inclusive of all major connection details submitted to & approved by OIC. All members shall be numbered	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Welding Procedure Specification (WPS) submitted to and approved by OIC	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	Checked steel grade and size, Hot rolled or Cold-formed?	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4	Welders with valid certificate approved by OIC	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
5	Method of fabrication approved by OIC. Fabricator has the necessary welding facilities and a shelter fabrication yard	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
B MATERIAL VERIFICATION & MILL CERTIFICATE (Use Form 1101)			
1	Correct sizes and dimensions, verified all dimensions, thickness (Flange & Web)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Mill/Test certificates submitted to OIC's approval: Steel ex-mills, ex-stocks, bolts and rivets, Electrodes	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	Tested welders' competence to undertake special welding procedures when instructed	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4	Material is visually acceptable, no visual defects such as warping, twisting, distortion, damaged sections, pitting	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
5	All plates and stiffener plate fit-ups are as per construction drawings	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
6	Steel HEAT number punched/transferred	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
C MARKING & CUTTING			
1	Marking, cutting & steel section dimensions (DxBxL) are within tolerance	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Steel markings provided	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	All bolt positions & drilling sizes are as per drawing	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
D BOLT CONNECTION			
1	Reconfirmed bolt grade & type, bolt dimension (dia. x length)	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Washer grade & type	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	Connection joints/splice joints constructed as per drawings	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4	Bolts tightened	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
5	All bolts are with minimum 1.5mm of thread beyond nut	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
6	Checked defect, e.g. Tilted bolts/holes enlarged by torch cutting. If Yes, submit the report of the remedy action	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
7	Checked embedment length and arrangement of holding down bolts	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
8	Location plan provided, please attach to this checklist	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
E WELDING CONNECTION (Use Form 1102 & 1103)			
1	Size and length of weld according to approved plan and specifications	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Reconfirmed welding electrode strength complies with specification	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	

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NO.	STANDARD	CHECK	REMARKS
3	Checked weld surface is clean & free from dust, rust & scales	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4	Welding done by qualified welders, verified their identity	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
5	Welding procedure as per approved WPS	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
6	Checked for any welding defects. E.g. undercuts, pits, surface cracks, lack of fusion. If yes, submit the remedy action report	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
7	Location plan provided, please attach	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
F	NON-DESTRUCTIVE TEST (NDT, Use Form 1104)		
1	Magnetic Particle IndicationTest (MPI) required for fillet weld. % of weld to be tested:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Ultrasonic Test (UT) required for fillet weld. % of weld to be tested:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	Penetrate Test (PT) required for fillet weld. % of weld to be tested:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
4	Ultrasonic Test (UT) required for butt weld. % of weld to be tested:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
5	Radiographic Test (RT) required for butt weld. % of weld to be tested:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
6	Remedial action taken for welding test failures	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
G	PAINTING & GALVANISING (use Form 1105, 1106 & 1107)		
1	Checked galvanised steel hot dipped to the specified requirements, use Form 1105 - Hot Dipped Galvanising Quality Inspection Report	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
2	Checked steel area is thoroughly cleaned, scraped, wire-brushed or sand blasted to specification, free from rust & scale before painting	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	
3	Galvanised steel / Surface painted to contract's specifications, use Form 1106 - Painting Inspection Report & Form 1107 - Painting Inspection Report Summary	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA	

Name of SS:		Name of OIC:	
Checked & Signed:	Reviewed Non-compliance:	Verified & Signed:	Reviewed Non-compliance:
Date:	Date:	Date:	Date: