| **DOTLOGO2.TIF** | | | | | | | | | | | | | | | | | | | | | | | | **Contractor**  **Daily (QC) Report** | | | | | | | | | | | | |
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| Contractor: |  | | | |  | Date: | | | |  | | | | | | | | | | | | | | |  | IR#: | | | |  | | | | | | | | |
| Bridge ID: |  | | | |  | Contractor QC Start Time: | | | | | | | | | | | | | | |  | | | |  | Stop Time: | | | | | |  | | | | | | |
| Location: |  | | | |  | Crew Start Time: | | | | | | | | |  | | | | | | | | | |  | Stop Time: | | | | | |  | | | | | | |
| Contract No.: | |  | | |  | No. of Workers: | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |
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| **Ambient Conditions** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Location** | | | | | Time | | | | Weather | | | | | Wind  MPH | | | | | DB  °F | | WB  °F | | | | RH  % | | | ST  °F | | DP  °F | +/- | | Comments | | | |
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| **Surface Preparation** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. | Location | | | Surface Preparation | | | | | | | | | | | Surface Profile | | | | | | | | | | | Comments | | | | | | | | | | |
|  |  | | | Spec. | | | | | | Actual | | | | | Spec. | | | | | Actual | | | | | |  | | | | | | | | | | |
| 1. |  | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | | | | |
| 2. |  | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | | | | |
| 3. |  | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | | | | |
| 4. |  | | |  | | | | | |  | | | | |  | | | | |  | | | | | |  | | | | | | | | | | |
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| If the shop primed steel is being coated,  OZ,  IZ,  Other. Has the surface been water cleaned/Pressure washed?  Yes  No  Has BBS 59 or approved shop drawing been received?  Yes  No  Primer manufacturer, trade name and batch number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **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 | | | | | | | | | | | | | | |  | | | |
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| Bridge ID/Location: | | | |  | | | | | | | | | | Date: | | |  | | | | | | IR#: |  | | | | |
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| **Coating Application** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| No. | | Location | | Coating Type | | | Mix# | | Application Time | | | | | | WFT Mils | | Comments | | | | | | |
|  | |  | |  | | |  | | Begin | | | End | | |  | |  | | | | | | |
| 1. | |  | |  | | |  | |  | | |  | | |  | |  | | | | | | |
| 2. | |  | |  | | |  | |  | | |  | | |  | |  | | | | | | |
| 3. | |  | |  | | |  | |  | | |  | | |  | |  | | | | | | |
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| If a shop IZ primer is present, has a mist coat been applied?  Yes  No | | | | | | | | | | | | | | | | | | | | | | | |
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| Mixing Report | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mix # | Location | Color | | Shelf  Life (yr) | | Comp A  Batch # | | Comp B  Batch # | | Comp C  Batch # | Thinner | | | | | | | Mat. °F | Time  of mix | | Ind.Time | | | Pot Life (hr) | Qty (gal) | Witnessed | |
|  |  |  | |  | |  | |  | |  | Name | | | | % | | |  |  | |  | | |  |  | Yes | No |
|  |  |  | |  | |  | |  | |  |  | | | |  | | |  |  | |  | | |  |  |  |  |
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| 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. |  |  |  | |  | |  | |  | | | | | |

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

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