

FIELD INSPECTION REPORT Quality Control Form		ITP No.:											
		Inspection Gr.											
		Report No.											
		Date											
INSPECTION TYPE AGGREGATE SIEVE ANALYSIS		WORK No.											
		ITEM No.											
		LOCATION											
		SIGNATURE											
INSPECTION NOTICE NO.:		COMPANY		CONTRACTOR		SUBCONT RACTOR							
COMPANY'S INSPECTOR:		/ /		/ /		/ /							
CONTRACTOR INSPECTOR:													
SUBCONTRACTOR INSPECTOR													
AGGREGATE SOURCE		DATE: _____, TIME: _____, LOCATION: _____, WEIGH: _____											
AGGREGATE SAMPLING													
SIEVE ANALYSIS													
DIAMETER (mm)		50.8	38.1	25.4	19.1	9.52	4.76	2.00	0.84	0.42	0.25	0.105	0.074
WEIGHT PERCENT PASSING	SAMPLE NO. _____												
	SAMPLE NO. _____												
	SAMPLE NO. _____												
	SAMPLE NO. _____												
<u>COMMENTS</u>													

Legend NA.: Not Applicable