Document QC.2

This sheet is to be completed by the Installation Supervisor .

This form is used in conjunction with the QC 1 *(Quality control sheet)* and the QC 3 (Mix control sheet).

All forms are to be filed in the appropriate manner and are to be made available to allnex as required.

Quality Control Site Checklist– Flooring Systems

|  |
| --- |
| **PRE START** |
| Work instructions available:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Work instructions clear & concise: * Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Surface preparation method specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Prefill requirements specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | System specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Thickness specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Colour specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Texture / non-slip specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Topcoat / number of coats specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Cove Height specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Cove Radius specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Cove Capping specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| allnex Flooring QC sheets on site:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | allnex technical literature / formulations on site:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Client sample approved:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| **HEALTH SAFETY & ENVIRONMENT** |
| Trained staff identified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | SDS on site:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | DG site signs on site:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| PPE: Goggles | masks | gloves | overalls* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Electrical equipment tagged & current:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Fire Extinguishers:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| “Danger” tape:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Spill Kits:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Waste disposal:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| SURFACE PREPARATION |
| Preparation acceptable: *(including upstands and panel )** Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Floor clean and dry:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Joints cut out clean:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Swept and / or vacuumed:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Moisture content correct:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| **MIXING** |
| Separate resin and aggregate scales:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Measuring by weight:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Clean and tidy:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| allnex QC3 mixing sheets filled in correctly:* Yes
* No
 |
| **INSTALLATION & EQUIPMENT** |
| Correct floats:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | All tools for product:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Fibre reinforcement to insulated panel:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Cove Capping installed correctly:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Cove Capping sealant installed correctly:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Prefill installation correct as specified:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Topping to correct thickness:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Visual aspect of installed topping: i.e. trowel marks* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Non-slip aggregate distribution even:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Colour distribution even:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Cove radius and installation correct:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Top coat applied: (if required)* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| Construction joints carried through:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Jointing detail good:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |
| 6. **COMPLETION** |
| Site cleaned up:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Floor protected:* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. | Client sign -off* Yes
* No

Comments…………………………………………………………………………………………………………………….…………………………………………………………………. |

I/We agree that the above is correct.

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

**Disclaimer:**

allnex Quality Checklists are an internal business tool for members of the allnex Contractors Federation Inc. They are a snapshot of contractor activity and do not necessarily indicate continuous business performance or on-site skills. It in no way implies any site responsibility by allnex. Full site responsibility resides with the contractor.