



**Western  
Technologies Inc.**  
The Quality People  
Since 1955

3480 South Dodge Boulevard  
Tucson, Arizona 85713-5435  
(520) 748-2262 • fax 748-0435

## LABORATORY REPORT ON CONCRETE / MASONRY CORES

Client **US DEPARTMENT OF VETERANS AFFAIRS**  
**SOUTHWEST VA COMP (762)**  
**3675 E. BRITTANIA DRIVE**  
**TUCSON, AZ 85706**

Date of Report **02-27-18**  
Job No. **2968JT031**

Event / Invoice No. **1** Lab No. **6529**  
Authorized By **DOMINGO LABORIN** Date **2/16/18**  
Sampled By **CONC. CORING CO.** Date **2/16/18**  
Submitted By **HARMON/WT** Date **2/16/18**

Project **GPR & CORING FOR STRENGTH**

Contractor

Type / Use of Material: ☒ Concrete ☐ RCC ☐ Shotcrete  
☐ Masonry Cores ☐

Location **3675 E. BRITTANIA DRIVE**

Arch. / Engr.

Supplier / Source

Source / Location Desig. By **CLIENT**

Date **2/16/18**

Sample Source / Location

Reference: **OBTAINING / TESTING DRILLED CORES**

Procedure: **ASTM C39 & C42**

Mortar Type:

Data: Mix Identification

Design Strength, psi **UNKN**

Nom. Max. Aggregate Size, in.

Date Placed **UNKN**

### TEST RESULTS

CORE IDENTIFICATION	1	2	3	4		
LOCATION OF CORE	SEE ATTACHED	SEE ATTACHED	SEE ATTACHED	SEE ATTACHED		
DATE TESTED	02-26-18	02-26-18	02-26-18	02-26-18		
CONCRETE AGE, DAYS	--	--	--	--		
LENGTH OF CORE, AS RECEIVED	6.0	5.7	5.7	6.0		
LENGTH BEFORE CAPPING, IN.	5.0	5.0	5.0	5.0		
LENGTH AFTER CAPPING, IN.	5.1	5.1	5.1	5.1		
DIAMETER, IN.	2.74	2.74	2.74	2.74		
LENGTH / DIAMETER RATIO	1.86	1.86	1.86	1.86		
CROSS-SECTIONAL AREA, SQ. IN.	5.90	5.90	5.90	5.90		
MAXIMUM LOAD, LBF	44882	42436	46853	45357		
COMPRESSIVE STRENGTH, PSI	7612	7197	7946	7692		
STRENGTH CORRELATION FACTOR	1.000	1.000	1.000	1.000		
CORRECTED COMPRESSIVE STRENGTH, PSI	7610	7200	7950	7690		
TYPE OF FRACTURE	TYPE 1	TYPE 1	TYPE 1	TYPE 1		
DIRECTION OF LOAD TO PLACEMENT PLANE	PERPENDICULAR	PERPENDICULAR	PERPENDICULAR	PERPENDICULAR		
MOISTURE CONDITION AT TIME OF TEST	*	*	*	*		
UNIT WEIGHT, LBF PER CU. FT.	145.1	143.4	144.0	143.1		
DEFECTS NOTED	NONE	NONE	NONE	NONE		

Comments: \* 5 DAY MOISTURE CONDITIONING PERFORMED

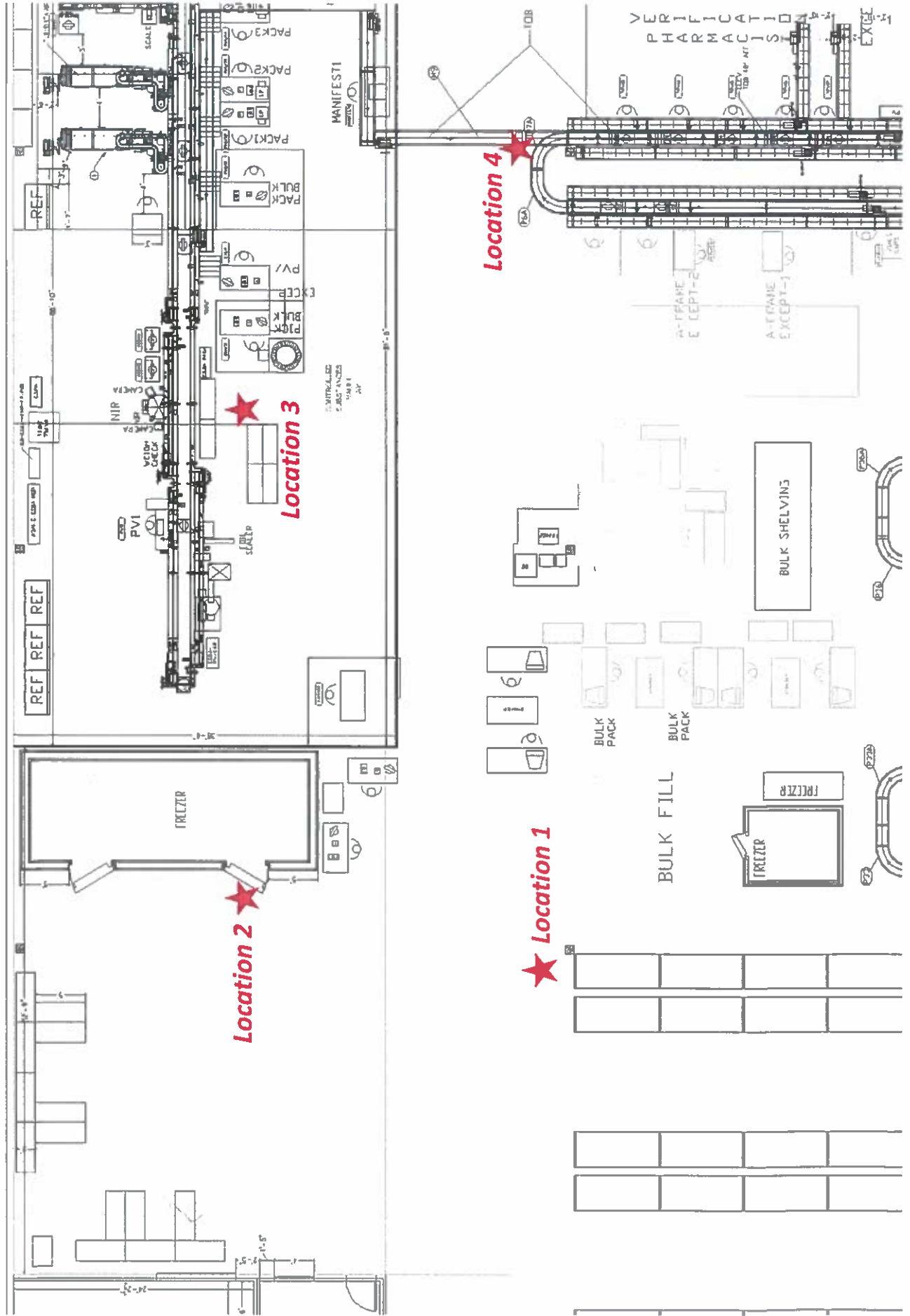
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REVIEWED BY

# Core Sampling Locations - CMOP





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# ITEM LOCATION FIELD REPORT

Client U.S Dept of VETERAN AFFAIRS

Job No. 2968JT031 Date Req'd \_\_\_\_\_

Project \_\_\_\_\_ Event / Invoice No. 1

Location 3675 E. BRITANIA DRIVE Responsible Technician B. HARMON Date 02-16-18

Prime Contractor \_\_\_\_\_ Reviewed By \_\_\_\_\_ Date \_\_\_\_\_

## TYPE OF FACILITY

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> VACANT LAND               | <input type="checkbox"/> RESTAURANT / CLUB   | <input checked="" type="checkbox"/> OFFICE / PROFESSIONAL | <input type="checkbox"/> INDUSTRIAL MANUFACTURING |
| <input type="checkbox"/> SINGLE FAMILY RESIDENTIAL | <input type="checkbox"/> RECREATION FACILITY | <input type="checkbox"/> MEDICAL FACILITY                 | <input type="checkbox"/> BRIDGE                   |
| <input type="checkbox"/> MULT-FAMILY RESIDENTIAL   | <input type="checkbox"/> RETAIL SALES        | <input type="checkbox"/> COMMERCIAL (VACANT)              | <input type="checkbox"/> TANK                     |
| <input type="checkbox"/> HOTEL / MOTEL             | <input type="checkbox"/> RETAIL SERVICES     | <input checked="" type="checkbox"/> INDUSTRIAL WAREHOUSE  | <input type="checkbox"/> OTHER _____              |

## TYPE OF ELEMENT

- |                                 |                                  |   |  |                                      |
|---------------------------------|----------------------------------|---|--|--------------------------------------|
| <input type="checkbox"/> BEAM   | <input type="checkbox"/> JOIST   | <input type="checkbox"/> FLOOR          | <input checked="" type="checkbox"/> GROUND | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> GIRDER | <input type="checkbox"/> WALL    | <input type="checkbox"/> SLAB-ON-GRADE  | <input type="checkbox"/> ROOF              |                                      |
| <input type="checkbox"/> COLUMN | <input type="checkbox"/> CEILING | <input type="checkbox"/> RETAINING WALL | <input type="checkbox"/> PIPE              |                                      |

## TYPE OF ELEMENT MATERIAL

- |   |  |                                      |
|---|--|--------------------------------------|
| <input type="checkbox"/> PORTLAND CEMENT CONCRETE | <input checked="" type="checkbox"/> CONCRETE MASONRY | <input type="checkbox"/> GROUND      |
| <input type="checkbox"/> PLAIN                    | <input checked="" type="checkbox"/> STEEL            | <input type="checkbox"/> ASPHALT     |
| <input type="checkbox"/> CAST-IN-PLACE            | <input type="checkbox"/> WOOD                        | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> REINFORCED               | <input type="checkbox"/> ADOBE                       |                                      |

## EVALUATION ITEMS

- |  |   |                                   |                                      |
|--|---|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> STEEL REINFORCEMENT | <input checked="" type="checkbox"/> CONDUIT | <input type="checkbox"/> VOIDS    | <input type="checkbox"/> OTHER _____ |
| <input type="checkbox"/> LOCATION            | <input type="checkbox"/> CABLE              | <input type="checkbox"/> PINHOLES |                                      |

## EQUIPMENT USED

- ☐ PACHOMETER ☐ FERRO SCAN ☒ GROUND-PENETRATING RADAR ☐ RADIOGRAPHY ☐ HOLIDAY TESTER ☐ OTHER \_\_\_\_\_

## OBSERVATIONS & ACTION TAKEN

- LOCATED THE REFERENCED ITEM(S) AT \_\_\_\_\_ LOCATION(S) AS INDICATED BY MARKINGS ON THE REFERENCED ELEMENT(S).
- PERFORMED GPR SCAN SLAB ON GRADE IN 4 AREAS AT DEPT OF VETERAN AFFAIRS. AREAS DEPICTED OF PROPOSED CORING CONTAINED OPEN ACCESS SLAB ON GRADE WITH SUSPENDED UTILITIES THROUGHOUT. CORE DRILLER ONSITE TO FACILITATE TEST CORES RETAINED TO BE TESTED. CORES RETAINED AND NUMBERED IN ACCORDANCE WITH AREA TAKEN FROM. CUSTOMER NOTED THAT A MAP WILL BE SENT TO FACILITATE LOCATIONS.

VERIFICATION METHOD USED:

WHITE - JOB FILE; YELLOW - JOB SITE

SERVICES DISCUSSED WITH CLIENT REPRESENTATIVE  
☐ YES ☐ NO, CALL WESTERN TECHNOLOGIES

DOMINGO LARBIN  
CLIENT REPRESENTATIVE PRINT NAME

[Signature]  
CLIENT REPRESENTATIVE SIGN NAME

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REVIEWED BY [Signature]

(SIGNED COPY ON FILE)

DATE