

CONTRACTOR'S QUALITY CONTROL REPORT (QCR)		DATE:	REPORT NO.:
CONTRACT NUMBER AND NAME OF CONTRACTOR:		DESCRIPTION AND LOCATION OF THE WORK:	
WEATHER CLASSIFICATION: CLASS A No interruptions of any kind from weather conditions occurring on this or previous shifts. CLASS B Weather occurred during this shift that caused a complete stoppage of all work. CLASS C Weather occurred during this shift that caused a partial stoppage of work. CLASS D Weather overhead excellent or suitable during shift. Work completely stopped due to results of previous adverse weather. CLASS E Weather overhead excellent or suitable during shift but work partially stopped due to previous adverse manner. OTHER Explain.		CLASSIFICATION: CLASS _____ TEMPERATURE: MAX _____ MIN _____ PRECIPITATION: INCHES _____	
CONTRACTOR/SUBCONTRACTORS AND AREA OF RESPONSIBILITY FOR WORK PERFORMED TODAY: <i>(Attach list of items of equipment either idle or working as appropriate.)</i> a. _____ b. _____ c. _____ d. _____ e. _____ f. _____ g. _____ 1. WORK PERFORMED TODAY: (Indicate location and description of work performed. Refer to work performed by prime and/or subcontractors by letter in Table above.)			
2. TYPE AND RESULTS OF INSPECTION: (Indicate whether: P - Preparatory, I - Initial, or F - Follow-up and include satisfactory work completed or deficiencies with action to be taken.)			
3. TESTS REQUIRED BY PLANS AND/OR SPECIFICATIONS PERFORMED AND RESULTS OF TESTS:			

4. VERBAL INSTRUCTIONS RECEIVED: (List any instructions given by Government personnel on construction deficiencies, retesting required, etc., with action to be taken.)

5. REMARKS: (Cover any conflicts in plans, specifications or instructions: acceptability of incoming materials: offsite surveillance activities; progress of work, delays, causes and extent thereof; days of no work with reasons for same.)

6. SAFETY: (Include any infractions of approved safety plan, safety manual or instructions from Government personnel. Specify corrective action taken.)

INSPECTOR

CONTRACTOR'S CERTIFICATION: I certify that the above report is complete and correct and that all material and equipment used, work performed and tests conducted during this reporting period were in strict compliance with the contract plans and specifications except as noted above.

CONTRACTOR'S APPROVED AUTHORIZED REPRESENTATIVE