

B. MATERIALS

Are all materials delivered in accordance with confirmed submittals? Yes _____ No _____ NA _____

Are materials stored properly? Yes _____ No _____ NA _____

Are materials being used in strict compliance with the Contract? Yes _____ No _____ NA _____

Are all required material inspections and testing being performed? Yes _____ No _____ NA _____

Explain No and NA responses. _____

C. INITIAL WORK

Is work in full compliance with procedures identified at Preparatory? Yes _____ No _____ NA _____

Is initial work complete without corrections? If not, note actions taken. Yes _____ No _____ NA _____

Explain No and NA responses. Confirm coordination between specifications, drawings, and submittals.

D. WORKMANSHIP

Is required level of workmanship established? Yes _____ No _____ NA _____

Explain No and NA responses. _____

Are QC tests being performed at required frequency? Yes _____ No _____ NA _____

Explain No and NA responses. _____

Are USIBWC concrete and soil test forms being utilized? Yes _____ No _____ NA _____

Explain No and NA responses. _____

Is sampling required? Yes _____ No _____

Will the initial work be considered a sample? Yes _____ No _____ NA _____

If this work is considered a sample, describe the location or work: _____

Other Workmanship Comments: _____

H. OTHER DISCUSSIONS

Explain other discussions held, agreements reached, decisions made, etc.: _____

Attach any additional document, sketches/details, manufacturer instructions, etc. discussed or used in initial phase meeting.

Repeat Initial Phase Meeting if any of the following occur:

1. Changes in the applicable CQC staff or onsite supervision (superintendent, SSHO, foreman, comp person).
2. If work on a definable feature of work is resumed after a substantial period of inactivity.
3. If quality cannot be maintained or other problems develop.

SSHO Signature

Prime Contractor's Superintendent Signature

SSHO Name

Prime Contractor's Superintendent Name

Crew Foreman Signature

Contractor's QC System Manger Signature

Crew Foreman Name

Contractor's QC System Manger Name

Government Inspector Signature

COR Signature, if in attendance

Government Inspector Name

COR Name