	PROJECT		Standby SRU & Additional Tanks	
	CLIENT		IOCL Paradip Refinery	
QCP-U/G Civil Works Sewers	Project No. 080557C001	Document No. 080557C-000-QCP-1470-001	Rev. No. A	Page 1 of 3

QUALITY CONTROL PLAN

U/G CIVIL WORKS

SEWERS

TYPE OF QUALITY CONTROL REPORT	CERTIFICATION EXTENT
CW 40-CW 41	SINGLE REPORT PER EACH IDENTIFIED SECTION OR ITEM
W 12/A	SINGLE REPORT PER EACH MATERIAL
W 18	SUMMARY



REFERENCE DOCUMENTS:

- 080557C-000-PP-805 SITE CO-ORDINATION & COMMUNICATION PROCEDURE
- 080557C-000-JSS-1400-002 SPECIFICATIONS FOR COATING AND WRAPPING OF U/G PIPES
- 080557C-000-LD-1490-001 U/G NETWORK STANDARDS
- Drawings

LEGENDA

H	=	HOLD (RFI required - Work stop for inspection)
W	=	WITNESS (RFI required)
WC	=	100 % SUPERVISION AND EXAMINATION BY CONTRACTOR.
P	=	PREPARATION.
S	=	SURVEILLANCE (No RFI)
R	=	REVIEW OF REPORTS
N.A.	=	NOT APPLICABLE
A	=	AUTHORIZATION / APPROVAL
IFA	=	ISSUED FOR AUTHORIZATION/APPROVAL
INFO	=	FOR INFORMATION
!	=	WARNING (control of document revision status)

A	19/10/2019	ISSUED FOR INFORMATION	SMP	PKP	LA/ANJ	JMC
REV.	DATE	DESCRIPTION	PREPARED	CHECKED	APPROVED	AUTHORIZED

 	PROJECT		Standby SRU & Additional Tanks	
	CLIENT		IOCL Paradip Refinery	
QCP-U/G Civil Works Sewers	Project No. 080557C001	Document No. 080557C-000-QCP-1470-001	Rev. No. A	Page 2 of 3



QUALITY CONTROL PLAN
U/G CIVIL WORKS SEWERS

QUALITY CONTROL ACTIVITIES

Nr.	CHECK AND INSPECTION ITEM	QUALITY CONTROL REPORT	ACTION		NOTES
			CONTR.	TECHNIP	
A)	PRELIMINARY ACTIVITIES				
A.1	CONTRACTOR DRAWINGS CHECK REVISION STATUS	N.A.	!	!	
A.2	CONTRACTOR TECHNICAL SPECIFICATION AND PROCEDURE	N.A.	!	!	
A.3	NON METALLIC PIPING MANUFACTURER INSTRUCTION	N.A.	WC	INFO	(1)
A.4	CONTRACTOR METHOD STATEMENT (IF REQUIRED)	N.A.	P	R	(1)
B)	BEFORE CONSTRUCTION				
B.1	MATERIALS APPROVAL	W12/A ASME	WC	INFO	(1) (2)
B.2	WELDING PROCED. SPECIFIC. (WPS)	or equiv.	WC	S	(3)
B.3	WELDERS PERFORM. QUALIFIC. (WPQ)	ASME or equiv.	WC	S	(3) (1)
B.4	LAMINATORS QUALIFICATION	LIST & QUALIFIC.	WC	INFO	(4)
C)	CONSTRUCTION				
C.1	EXCAVATION	CW 61A - CW41	WC	R S	(5)
C.2	REINFORCED CONCRETE PITS		WC	W/R	(5)
C.3	PIPES JOINING	CW 41	WC	W/R	
C.3.1	JOINING VISUAL CHECK	CW 41	WC	S	
C.4	PIPES POSITIONING	CW 40-CW 41	WC	W/R	
C.5	PIPES/PITS JOINTS SEALING	CW 40-CW 41	WC	W/R	
C.6	LEAKAGE (GRAVITY TEST)	CW 40-CW 41	WC	W/R	
C.7	AUTHORIZATION FOR JOINTS PROTECTION RESTORE (IF ANY)	CW 41	WC	W/R	
C.8	RESTORED JOINTS CHECK	W 18-CW 41	WC		

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CONFIDENTIAL – Not to disclose without Authorization

 	PROJECT		Standby SRU & Additional Tanks	
	CLIENT		IOCL Paradip Refinery	
QCP-U/G Civil Works Sewers	Project No. 080557C001	Document No. 080557C-000-QCP-1470-001	Rev. No. A	Page 3 of 3

QUALITY CONTROL PLAN
U/G CIVIL WORKS SEWERS

QUALITY CONTROL ACTIVITIES

Nr.	CHECK AND INSPECTION ITEM	QUALITY CONTROL REPORT	ACTION		NOTES
			CONTR.	TECHNIP	
C.9	AUTHORIZATION FOR BACK FILLING	CW 41	WC	S	(5)
C.10	BACK FILLING	CW 61B – CW41	WC	R	
C.11	FINAL DOCUMENTATION REVIEW	CW 41	P	R	

NOTES: (1) A COPY OF THE DOCUMENT WILL BE DELIVERED TO COMPANY FOR INFORMATION
(2) MATERIAL APPROVAL WILL BE EXECUTED ONLY FOR MATERIALS SUPPLIED BY CONTRACTOR
(3) FOR CARBON STEEL PIPES ONLY
(4) FOR NO METALLIC PIPES ONLY
(5) FORMS, INSPECTION AND ATTENDANCE SHALL BE IN ACCORDANCE WITH REFERRED QCP

GENERAL NOTES

- THE ENCLOSED ITP'S ARE INDICATIVE AND SHALL BE FOLLOWED FOR DEVELOPING THEJOB SPECIFIC ITP'S FOR THE WORKS TO BE PERFORMED BY THE CONTRACTOR. THE PROVISIONS INDICATED FOR STAGE WISE INSPECTION BY TECHNIP AND OWNER (FOR SPECIFIC ACTIVITIES) ARE THE MINIMUM AND THE ENGINEER-IN- CHARGE MAY DECIDE TO INCREASE HOLD POINTS/ WITNESS POINTS, WHILE APPROVING THE JOB SPECIFIC ITP'S. ACTIVITIES FOR WHICH ITP'S ARE NOT PROVIDED IN THIS SPECIFICATION. CONTRACTOR TO DEVELOP AND GET THE SAME APPROVED BY TECHNIP/OWNER BEFORE START OF THE WORK. IN GENERAL ROLE OF TECHNIP HAS BEEN SPECIFIED IN THE DOCUMENT THE ROLE OF OWNER TO BE SPECIFIED DURING PREPARATION OF SITE SPECIFIC ITP'S.
- CONTRACTOR TO SUBMIT JOB SPECIFIC REPORTING FORMATS AND JOB PROCEDURES FOR THE JOBS FOR EACH ACTIVITY LISTED IN THE ITP'S AND SUBMIT TO TECHNIP/OWNER FOR APPROVAL. BEFORE COMMENCEMENT OF THE ACTIVITY. IF THE CONTRACTOR HAS TO DEVIATE FROM THE GIVEN ITP FOR A VALID REASON, HE SHALL OBTAIN PRIOR WRITTEN APPROVAL OF TECHNIP/OWNER. CONTRACTOR TO CARRY OUT 100% EXAMINATION OF ALL ACTIVITIES.



PROJECT:

COMPANY:

QUALITY CONTROL FORM **CW 41**

PROJ. No.:

QCF REV. A

SH. 1 OF 1

**SEWER CONSTRUCTION
SUMMARY REPORT**

CONTRACTOR:

CW 41 N° _____

SEWER SERVICE _____ LINE No. _____

FROM PIT..... TO PIT.....

DRAWING No. _____ REV. _____ AREA _____

MATERIAL: CAST IRON ☐ CARBON STEEL ☐ CONCRETE ☐ PVC ☐ _____ ☐



INSPECTIONS (Ref. to QCP 1470.01)		N.A.	ACC.	REMARKS/ REFERENCES	INSPECTOR SIGNATURE & DATE		
					CONTRACT.	TECHNIP	OWNER
C.1	EXCAVATION	<input type="checkbox"/>	<input type="checkbox"/>	CW 61A (*)			
C.3	PIPES JOINING	<input type="checkbox"/>	<input type="checkbox"/>				
C.3.1	JOINING VISUAL CHECK	<input type="checkbox"/>	<input type="checkbox"/>				
C.4	PIPES POSITIONING	<input type="checkbox"/>	<input type="checkbox"/>	CW 40 (*)			
C.5	PIPES/PITS SEALING	<input type="checkbox"/>	<input type="checkbox"/>	CW 40 (*)			
C.6	LEAKAGE (GRAVITY TEST)	<input type="checkbox"/>	<input type="checkbox"/>	CW 40 (*)			
C.7	AUTHORIZATION FOR JOINTS PROTECTION RESTORE	<input type="checkbox"/>	<input type="checkbox"/>				
C.8	RESTORED JOINTS CHECK	<input type="checkbox"/>	<input type="checkbox"/>	W 18 (*)			
C.9	AUTHORIZATION FOR BACKFILLING YES <input type="checkbox"/> NO <input type="checkbox"/>						
C.10	BACKFILLING	<input type="checkbox"/>	<input type="checkbox"/>	CW 61B (*)			

NOTES: (*) THE QC REPORTS N° SHALL BE INDICATED IN THE RELEVANT HERE BELOW SPACES :

CW 40 N° _____ W 18 N° _____ CW 61A N° _____ CW 61B N° _____

QCF STANDARD REV.1

C.11) FINAL DOC. REVIEW	INSPECTORS	CONTRACTOR	PMC	OWNER
	NAME			
	SIGNATURE			
	DATE			

 		PROJECT:	
		COMPANY:	
QUALITY CONTROL FORM W 12/A		PROJ. No.:	QCF REV. A
CONSTRUCTION MATERIALS APPROVAL		CONTRACTOR:	W 12/A N° _____
CIVIL <input type="checkbox"/>	PIPING <input type="checkbox"/>	MACHINERY <input type="checkbox"/>	INSULATION <input type="checkbox"/>
BLDG. <input type="checkbox"/>	MECHANIC. <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>	STEEL STR. <input type="checkbox"/>
NDT <input type="checkbox"/>	SUPPORT PRF. <input type="checkbox"/>	_____ <input type="checkbox"/>	_____ <input type="checkbox"/>
1. MATERIALS			
2. SUPPLIER			
3. PURPOSE			
4. ATTACHMENT DATA			
5. TYPE OF TEST PERFORMED			
6. TEST STANDARD UTILIZED			
REMARKS:			
RESULT:		ACCEPTED <input type="checkbox"/>	NOT ACCEPTED <input type="checkbox"/>
INSPECTORS	CONTRACTOR	PMC	OWNER
NAME			
SIGNATURE			
DATE			



COMPANY:

W 18

QCF REV. A

SH. 1 OF 1

CONTRACTOR:

W 18 N° _____

DATE:

[illegible]

TEST RESULT:

ACCEPTED ☐

NOT ACCEPTED ☐

INSPECTORS	CONTRACTOR	PMC	OWNER
NAME			
SIGNATURE			
DATE			