	<b>PROJECT</b>	<b>Standby SRU &amp; Additional Tanks IOCL Paradip Refinery</b>		
	<b>CLIENT</b>	<b>INDIAN OIL CORPORATION LIMITED</b>		
<b>QCP-ABOVE GROUND CIVIL WORKS CONCRETE ELEMENTS INSTALLATION</b>	<b>Project No.</b> 080557C001	<b>Document No.</b> 080557C-000-QCP-1710-005	<b>Rev. No.</b> A	Page 1 of 3

**QUALITY CONTROL PLAN**  
**ABOVE GROUND CIVIL WORKS**  
**CONCRETE ELEMENTS INSTALLATION**

TYPE OF QUALITY CONTROL REPORT	CERTIFICATION EXTENT
W 12/A	SINGLE REPORT PER EACH MATERIAL
CW 61A & CW 61B	SINGLE REPORT PER EACH MATERIAL
CW 33C	SUMMARY REPORTS

**REFERENCE DOCUMENTS**

- 080557C-000-PP-805 SITE CO-ORDINATION & COMMUNICATION PROCEDURE
- 080557C-000-JSS-1700-001 SPECIFICATIONS FOR PLAIN & REINFORCED CEMENT CONCRETE
- 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	06.11.2019	ISSUED FOR INFORMATION	TB	LA	LA/ANJ	JMC
REV.	DATE	DESCRIPTION	WRITTEN BY	CHECKED BY	APPROVED BY	AUTHORIZED
DOCUMENT REVISIONS						

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CONFIDENTIAL – Not to disclose without Authorization



 	<b>PROJECT</b>	<b>Standby SRU &amp; Additional Tanks IOCL Paradip Refinery</b>		
	<b>CLIENT</b>	<b>INDIAN OIL CORPORATION LIMITED</b>		
<b>QCP-ABOVE GROUND CIVIL WORKS CONCRETE ELEMENTS INSTALLATION</b>	<b>Project No.</b> 080557C001	<b>Document No.</b> 080557C-000-QCP-1710-005	<b>Rev. No.</b> A	Page 2 of 3

**QUALITY CONTROL PLAN  
ABOVE GROUND CIVIL WORKS  
CONCRETE ELEMENTS INSTALLATION**

**QUALITY CONTROL ACTIVITIES**



Nr.	CHECK AND INSPECTION ITEM	QUALITY CONTROL REPORT	ACTION		NOTES
			CONTRACTOR	TECHNIP	
<b>A)</b>	<b>PRELIMINARY ACTIVITIES</b>				
A.1	CONTRACTOR DRAWINGS CHECK REVISION STATUS	N.A.	!	!	
A.2	CONTRACTOR TECHNICAL SPECIFICATION AND PROCEDURE	N.A.	IFA	A	
A.3	CONTRACTOR METHOD STATEMENT & ENGINEERED LIFTING STUDY (IF REQUIRED)	N.A.	P	A	(1)
<b>B)</b>	<b>BEFORE INSTALLATION</b>				
B.1	MATERIALS APPROVAL (IF ANY)	W 12/A	IFA	A	(1)
<b>C)</b>	<b>EXCAVATION (IF ANY)</b>	CW 61A / CW 33C	WC	R	(2)
<b>D)</b>	<b>CONCRETE ELEMENTS INSTALLATION FOR SLEEPERS AND FOUNDATIONS</b>				
D.1	REINFORCED CONCRETE (CAST IN SITU)	CW 33 / CW 33C	WC	W/R	(2)
D.2	PREFABRICATED ELEMENTS	CW 33B / CW 33C	WC	W/R	(2)
D.2.1	ELEMENT IDENTIFICATION AND VISUAL APPEARANCE	CW 33C	WC	R	
D.2.2	INSTALLATION	CW 33C	WC	W/R	
D.2.3	POSITIONING:	CW 33C	WC	W/R	
	- ORIENTATION				
	- ALIGNMENT				
	- ELEVATION				
D.3	PROTECTIVE COATING (WHERE REQUIRED)	CW 33C	WC	W/R	
D.4	BACKFILLING	CW 61B / CW33C	WC	R	(2)
D.5	FINAL DOCUMENTATION REVIEW	CW 33C	P	R	

NOTES: (1) A COPY OF THE DOCUMENT WILL BE DELIVERED TO OWNER FOR INFORMATION  
(2) FORMS, INSPECTIONS AND ATTENDANCE SHALL BE IN ACCORDANCE WITH REFERRED QCP

 	<b>PROJECT</b>	<b>Standby SRU &amp; Additional Tanks IOCL Paradip Refinery</b>		
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<b>QCP-ABOVE GROUND CIVIL WORKS CONCRETE ELEMENTS INSTALLATION</b>	<b>Project No.</b> 080557C001	<b>Document No.</b> 080557C-000-QCP-1710-005	<b>Rev. No.</b> A	Page 3 of 3

#### GENERAL NOTES

- 1 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.
- 2 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 <b>W 12/A</b>		PROJ. No.:	SH. 1 OF 1
<b>CONSTRUCTION MATERIALS APPROVAL</b>		CONTRACTOR:	
CIVIL <input type="checkbox"/>	PIPING <input type="checkbox"/>	MACHINERY <input type="checkbox"/>	INSTRUMENT <input type="checkbox"/>
BLDG. <input type="checkbox"/>	MECHANIC. <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>	PAINTING <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"/>			
<b>INSPECTORS</b>	<b>CONTRACTOR</b>	<b>TECHNIP</b>	<b>OWNER</b>
NAME			
SIGNATURE			
DATE			

				PROJECT:			
				COMPANY:			
QUALITY CONTROL FORM		<b>CW 61 B</b>		PROJ. No.:	QCF REV. 0	SH. 1 OF 1	
<b>BACKFILLING SUMMARY REPORT</b>				CONTRACTOR:		<b>CW 61 B N°</b> _____	
TRENCH IDENTIFICATION / ITEM _____ COORDINATES _____ AREA _____ DWG'S & REV. _____					EXCAVATION FOR: U/G PIPING <input type="checkbox"/> U/G CABLES <input type="checkbox"/> FOUNDATIONS <input type="checkbox"/> ..... <input type="checkbox"/>		
INSPECTIONS (Ref. to QCP 1440.01)		N.A.	ACC.	REMARKS/ REFERENCES	INSPECTOR SIGNATURE & DATE		
					CONTRACTOR	TECHNIP	OWNER
F.1	SAND COVERING	<input type="checkbox"/>	<input type="checkbox"/>				
F.2	BACKFILLING	<input type="checkbox"/>	<input type="checkbox"/>				
F.3	GROUND DENSITY TEST	<input type="checkbox"/>	<input type="checkbox"/>	QC 11 (*)			
F.4	FINISHING WORK	<input type="checkbox"/>	<input type="checkbox"/>				
NOTES: (*) THE QC REPORTS N° SHALL BE INDICATED IN THE RELEVANT HERE BELOW SPACES : QC 11 N° _____							
<b>F.5) FINAL DOC. REVIEW</b>	<b>INSPECTORS</b>		<b>CONTRACTOR</b>		<b>TECHNIP</b>		<b>OWNER</b>
	NAME						
	SIGNATURE						
	DATE						

		PROJECT:		
		COMPANY:		
QUALITY CONTROL FORM <b>CW 61 A</b>		PROJ. No.:	QCF REV. 0	SH. 1 OF 1
<b>SECTION EXCAVATION SUMMARY REPORT</b>		CONTRACTOR:		CW 61 A N° _____
TRENCH IDENTIFICATION / ITEM _____ COORDINATES _____ AREA _____ DWG'S & REV. _____			EXCAVATION FOR: U/G PIPING <input type="checkbox"/> U/G CABLES <input type="checkbox"/> FOUNDATIONS <input type="checkbox"/> ..... <input type="checkbox"/>	
<b>INSPECTIONS (Ref. to QCP 1440.01)</b>		<b>N.A.</b>	<b>ACC.</b>	<b>REMARKS/ REFERENCES</b>
		<b>INSPECTOR SIGNATURE &amp; DATE</b>		
		<div style="display: flex; justify-content: space-around;"> <span>CONTRACTOR</span> <span>TECHNIP</span> <span>OWNER</span> </div>		
E.1	POSITION AND ROUTING	<input type="checkbox"/>	<input type="checkbox"/>	
E.2	EXCAVATION & DEPTH	<input type="checkbox"/>	<input type="checkbox"/>	
E.3	COMPACTED GROUND	<input type="checkbox"/>	<input type="checkbox"/>	
E.4	GROUND DENSITY TEST	<input type="checkbox"/>	<input type="checkbox"/>	QC 11 (*)
E.5	SEND BED / LEAN CONCRETE ELEVATION	<input type="checkbox"/>	<input type="checkbox"/>	
E.6	ANCHOR BLOCKS OPERATIONAL AREA CLEAR	<input type="checkbox"/>	<input type="checkbox"/>	
E.7	TRANSPORT OF EXCAVATED MATERIAL TO DISPOSAL AREA	<input type="checkbox"/>	<input type="checkbox"/>	
NOTES: (*) THE QC REPORTS N° SHALL BE INDICATED IN THE RELEVANT HERE BELOW SPACES : QC 11 N° _____				
<b>E.8) FINAL DOC. REVIEW</b>	<b>INSPECTORS</b>	<b>CONTRACTOR</b>		<b>TECHNIP</b>
	<b>NAME</b>			
	<b>SIGNATURE</b>			
	<b>DATE</b>			
		<b>OWNER</b>		



PROJECT:

COMPANY:

QUALITY CONTROL FORM

CW 33C

PROJ. No.:

QCF REV. 0

SH. 1 OF 1

CONTRACTOR:

CW 33C N° \_\_\_\_\_

ITEM \_\_\_\_\_

SLEEPER ☐

AREA \_\_\_\_\_

FOUNDATION ☐

DWG'S &amp; REV \_\_\_\_\_

INSPECTIONS

(REF. TO QCP 1710.05)

N.A.

ACC

REMARKS /  
REFERENCES

INSPECTORS SIGNATURE &amp; DATE

CONTRACTOR

TECHNIP

OWNER

☐☐

CW 61A (\*)

☐☐

CW 33 (\*)

☐☐

CW 33B (\*)

☐☐☐☐☐☐SEE ATTACHED  
SKETCH☐☐☐☐☐☐☐☐

CW 61B (\*)

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

CW 33 N° \_\_\_\_\_ CW 33B N° \_\_\_\_\_ CW 61A N° \_\_\_\_\_ CW 61B N° \_\_\_\_\_

D.5) FINAL DOC.  
REVIEW

INSPECTORS

CONTRACTOR

TECHNIP

OWNER

NAME

SIGNATURE

DATE