



**ARCOR<sup>®</sup> International**

E P O X Y T E C H N O L O G I E S<sup>®</sup>

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## **Quality Control Forms**

- Quality Control Checklist
- Surface Preparation Checklist
- Surface Analysis
- Surface Profile Record
- Environmental Conditions
- Coating Application Checklist
- Material Batch Record
- Dry Film Thickness Record
- Spark Test Record



## QUALITY CONTROL INSPECTION REPORT

JOB # \_\_\_\_\_ PAGE \_\_\_\_ OF \_\_\_\_

### QUALITY CONTROL CHECKLIST

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

	ACCEPT	REJECT	NOTE
<b>Environment</b>	_____	_____	_____
<b>Surface Profile</b>	_____	_____	_____
<b>Surface Cleanliness</b>	_____	_____	_____
<b>Surface Temperature</b>	_____	_____	_____
<b>Base Coat</b>	_____	_____	_____
<b>Intermediate Coat</b>	_____	_____	_____
<b>Top Coat</b>	_____	_____	_____
<b>Total Film Thickness</b>	_____	_____	_____
<b>Spark Test</b>	_____	_____	_____

QC Inspector: \_\_\_\_\_

Date Of Inspection: \_\_\_\_\_



## QUALITY CONTROL INSPECTION REPORT

JOB # \_\_\_\_\_ PAGE \_\_\_ OF \_\_\_

### QC CHECKLIST FOR SURFACE PREPARATION

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

YES	NO	N/A	PRELIMINARY CONDITIONS
___	___	___	Is the compressed air supply free of oil and moisture ?
___	___	___	Is the surface free of grease, oil, tar and crayon marks ?
			List type(s) of contamination: _____
___	___	___	Is the surface dry and moisture free ?
___	___	___	Are steel defects present ?
			List type (s) of defects: _____
<b>SOLVENT CLEANING</b>			
___	___	___	Is solvent cleaning required ?
___	___	___	Are clean rags, clean brushes and proper solvent available ?
___	___	___	Was solvent cleaning completed as required per SSPC-SP-1 ?
<b>AMBIENT CONDITIONS</b>			
___	___	___	Is the air temperature between ___ °F and ___ °F ?
___	___	___	Is the surface temperature between ___ °F and ___ °F ?
___	___	___	Is the relative humidity below ___ % ?
___	___	___	Is the dew point at least 5° F below the surface temperature ?
___	___	___	If required, is the environmental control equipment in place and operational ?
<b>INSPECTION RESULTS</b>			
___	___	___	Was the surface preparation operation completed during the shift ?
___	___	___	Did the level of cleanliness meet SSPC-SP- _____ ?
___	___	___	Are two surface profile readings above ___ mils (0.001 in.) ?
___	___	___	Has the surface quality been accepted by the owner's QC Department ?

QC INSPECTOR \_\_\_\_\_ INSPECTION DATE \_\_\_\_\_



## QUALITY CONTROL INSPECTION REPORT

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### SURFACE CONTAMINATION ANALYSIS TEST (SCAT)

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

CALCULATION	Determination 1	Determination 1
LINE (1) Tritrator Strip Reading	(ppm)	(ppm)
LINE (2) Volume Of Water	milliliters (ml)	milliliters (ml)
LINE (3) = LINE (1) x LINE (2) (cm <sup>2</sup> = 6.45 x in <sup>2</sup> )	micrograms (µg Cl-)	micrograms (µg Cl-)
LINE (4) Surface Area Swabbed	(cm <sup>2</sup> )	(cm <sup>2</sup> )
LINE (5) = LINE (3) ÷ LINE (4)	µg (Cl-) per cm <sup>2</sup>	µg (Cl-) per cm <sup>2</sup>
LINE (6) = LINE (5) x 10	µg (Cl-) per M <sup>2</sup>	µg (Cl-) per M <sup>2</sup>

QC INSPECTOR \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_



## QUALITY CONTROL INSPECTION REPORT

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### SURFACE PROFILE RECORD

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

AREA #	PROFILE READING

AREA #	PROFILE READING

AREA #	PROFILE READING

AREA #	PROFILE READING

QC Inspector: \_\_\_\_\_

Date Of Inspection: \_\_\_\_\_





## QUALITY CONTROL INSPECTION REPORT

JOB # \_\_\_\_\_ PAGE \_\_\_\_ OF \_\_\_\_

### QC CHECKLIST FOR COATING APPLICATION

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

**YES NO N/A**

#### AMBIENT CONDITIONS

\_\_\_\_

Is the air temperature between \_\_\_\_ °F and \_\_\_\_ °F ?

\_\_\_\_

Is the surface temperature between \_\_\_\_ °F and \_\_\_\_ °F ?

\_\_\_\_

Is the relative humidity below \_\_\_\_ % ?

\_\_\_\_

Is the dew point at least 5°F below the surface temperature ?

\_\_\_\_

If required, is the environmental control equipment in place and operational ?

#### COATING MATERIAL

Primer  Intermediate

Finish  Touch Up

Batch # \_\_\_\_\_

Application Equipment \_\_\_\_\_

\_\_\_\_

Is the compressed air supply free of oil and moisture ?

\_\_\_\_

Is the surface free of oil, grease, moisture and contamination ?

\_\_\_\_

Has the surface remained acceptable per SSPC-SP- \_\_\_\_\_ ?

\_\_\_\_

Is the surface free of dust, dirt and spent abrasives ?

\_\_\_\_

Are the required protective coverings in place ?

\_\_\_\_

Is the mixing and application equipment clean and operational ?

\_\_\_\_

Are wet film thickness gauges being used by the applicator ?

\_\_\_\_

Has the material been mixed per the manufacturer's instructions ?

\_\_\_\_

Has the material been applied within the usable pot life ?

QC INSPECTOR \_\_\_\_\_ INSPECTION DATE \_\_\_\_\_





## QUALITY CONTROL INSPECTION REPORT

JOB # \_\_\_\_\_ PAGE \_\_\_ OF \_\_\_

### DRY FILM THICKNESS READINGS

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

LOCATION				
Thickness mils (0.001")		T	Avg.	%/ min
Sum Of Averages				
Average Of Five Readings				

LOCATION				
Thickness mils (0.001")		T	Avg.	%/ min
Sum Of Averages				
Average Of Five Readings				

LOCATION				
Thickness mils (0.001")		T	Avg.	%/ min
Sum Of Averages				
Average Of Five Readings				

LOCATION				
Thickness mils (0.001")		T	Avg.	%/ min
Sum Of Averages				
Average Of Five Readings				

QC Inspector: \_\_\_\_\_

Date Of Inspection: \_\_\_\_\_



## QUALITY CONTROL INSPECTION REPORT

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### HIGH VOLTAGE SPARK TESTING RECORD

Revised 1/93

Project: \_\_\_\_\_

Client: \_\_\_\_\_

Area / Item: \_\_\_\_\_

SERIAL #	DEFECT LOCATION	REPAIR
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____
		DATE: _____
		RETEST: _____

SPARK TESTER SERIAL # \_\_\_\_\_

QC INSPECTOR \_\_\_\_\_

VOLTAGE SETTING \_\_\_\_\_

WAND TYPE \_\_\_\_\_

INSPECTION DATE \_\_\_\_\_