

FIELD INSPECTION REPORT Quality Control Form				ITP No.:									
				Inspection Gr.									
				Report No.									
				Date									
INSPECTION TYPE AGGREGATE SIEVE ANALYSIS				WORK No.									
				ITEM No.									
				LOCATION									
				SIGNATURE									
INSPECTION NOTICE NO.:				COMPANY			CONTRACTOR			SUBCONTRACTOR			
COMPANY'S INSPECTOR:				/ /			/ /			/ /			
CONTRACTOR INSPECTOR:													
SUBCONTRACTOR INSPECTOR													
AGGREGATE SOURCE				DATE: _____, TIME: _____, LOCATION: _____, WEIGHT: _____									
AGGREGATE SAMPLING													
SIEVE ANALYSIS													
DIAMETER (mm)		50.8	38.1	25.4	19.1	9.52	4.76	2.00	0.84	0.42	0.25	0.105	0.074
WEIGHT PERCENT PASSING	SAMPLE NO. _____												
	SAMPLE NO. _____												
	SAMPLE NO. _____												
	SAMPLE NO. _____												
<u>COMMENTS</u>													