

# Internal Check & Test Procedure

BoQ Plan Actual

Region: Cianjur

Link From:

Address: Feeder Open Area Ciandam / XL32C1R00202

No.	Item	BoQ Plan (WO)	BoQ Actual (Redline)	+/-	Unit
1	Pole 9m, 5inch				Unit
2	Pole 7m, 4inch	41	32		Unit
3	Pole 7m, 3inch (HC)				Unit
4	FDT				Unit
5	FAT				Unit
6	Cable 24 core	3454	3400		M1
7	Cable 36 core				M1
8	Cable 48 Core				M1
9	Joint Closure				Unit
10	Splitter 1:16				Unit
11	Sling wire				M1
12.	Section Frame	10	8		

Comments:

Signatures:

Responsible Subcontractor

Name: Abrar Nasrul

ID:

Signature: [Signature]

Responsible Mandor

Name: TIRA

ID:

Signature: [Signature]

## Internal Check & Test Procedure

Checklist for Cable Installation in HH, HH Pit and OTB  
(Visual Inspection)

Region: Cianjur

Cluster: \_\_\_\_\_

Link From: \_\_\_\_\_

To: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

No.	Item	Requirements	Comment
1	Handhole	Cable arrangement and coil in turn slack on bracket	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Joint closure and excess cable on the bracket properly	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cleaness of handhole after cable pulled	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
2	HH Pit	Cable Arrangement and coil in turn side slack	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable Place on the bracket properly	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cleaness of handhole after cable pulled	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
3	OTB	Cable enter to the OTB properly	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable protected by corrugated HDPE (exposed)	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable arrangement enter to the cabinet properly	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Label OTB and Port (PTB harus di label dan keterangan susunan port)	<input type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
4	Aerial Cable	The cable ground clearance conform to required height	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		The slack cable is coiled in the coiling holder at >20 times the cable diameter	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		The cable is properly tensioned /clamped / wrapped	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable is properly secured at the pole	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Bending radius 20 times of cable diameter at turning point	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable damage	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A
		Cable labelling	<input checked="" type="checkbox"/> passed <input type="checkbox"/> fail <input type="checkbox"/> N/A

Remark: \_\_\_\_\_

Signatures:

Responsible Subcontractor

Name: Abrar. a

Responsible Mandor

Name: TIRs

ID:

Signature: [Signature]

ID:

Signature: [Signature]

Date:

26-Jan-2024

Date: \_\_\_\_\_



Chondria

*Chamaeleon*

### Appendix

**Figure 6**

**Case 10: 03-10003**

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Responsible Manager:

Name \_\_\_\_\_

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**Abstract**

Order