



Material Verification Inspection Checklist

Project			
Client		Insp. No.:	0
Consultant	:	Date:	0-Jan-00
Contractor	: Saudi Amana Contracting Co	Location:	DUBOX Rabigh
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		

Reference Documents (Specifications, Drawings, others...),

0

Checked by:

Quality Dept.

Name: **0** Position: **QA/QC Engineer** Sign: _____ Date **0-Jan-00**

Operation Team

Name		Position:		Signature		Date	
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AMAALA

AMANA.

CONSTRUCTION OF PRECAST CONCRETE MODULAR AT FACTORY CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
A. General			
1 Ensure method statement, materials and shop drawings are approved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ensure materials are stored under dry, clean, shaded area, away from sunlight and other sources of heat.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check the expiry date of the material prior to applications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Preparation & Setting Out			
4 Drawing Stamp & Signature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Element Tag, QC Approval for Element	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Floor Setting Out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Erection / Assembling of Precast Element			
External Walls			
7 Erection with temporary support.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Panel to panel connections.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Dimensions (outer, inner and diagonal), line and level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor Slab(s)			
10 Backer Rod / Shim Pad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Slab Position / Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Panel to Slab Connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 1000mm FFL to be marked clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 MEP Clearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check the Slab level (shall read 1016mm at 1000m FFL line)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Grouting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internal Partition			
17 Erection with Temporary Support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Panel to Panel Connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 Dimensions (outer, inner and diagonal), Line and Level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Grouting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Top Slabs			
21 Backer Rod / Shim Pad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 Slab Position / Top Height	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23 Panel to Slab Connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 MEP Clearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 Grouting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26 Curing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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CONSTRUCTION OF PRECAST CONCRETE MODULAR AT FACTORY CHECKLIST

Project : AMAALA STAFF VILLAGE – ZONE 05

Client : AMAALA COMPANY

Insp. No.: _____

Consultant : SAUDI ARABIAN PARSONS LTD

Date: _____

Contractor : SAUDI AMANA CONTRACTING CO. L.L.C.

Location: _____

Sub-Contractor : _____

Element: _____

27 Internal and External Dimension of Box

28 Check for edges + Angles + grooves + chamfer + Pin holes + Cracks before moving to finishing area.

Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Sub Contractor

Name _____ Position: _____ Signature _____ Date _____



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PAINTING CHECKLIST

Project : AMAALA STAFF VILLAGE ZONE-05		Insp. No.: <u>0</u>
Client : AMAALA	Date: <u>0/Jan/00</u>	
Consultant : PARSONS	Location: <u>Dubox Factory</u>	
Contractor : Saudi Amana Contracting Co	Box: <u>0</u>	
Sub-Contractor : DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		
Reference Documents (Specifications, Drawings, others...),		
Activity/Item:		Y N N/A
A. General		
1	Ensure method statement, materials and drawings (finishing schedule) are approved.	
2	Ensure materials are stored as per manufacturers recommendations.	
3	Verify the expiry date and number of coats of the material prior to applications.	
4	Check the Location, Colour, Type of Painting as per the approved shop drawings / material submittal.	
B. Surface Preparation		
5	Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and greese.	
6	Check for repair of surface imperfection and protrusions (if any).	
7	Moisture content for the substrate and environmental conditions as per manufacturer recommendations.	
8	Undulations or irregular corners are repaired and grinded as required.	
C. Application of Internal Paint		
9	Ensure application of Primer as per manufacturers recommendation	
10	Ensure application of Stucco as per manufacturers recommendation	
11	Touchup, grinding, undulations, corner repairs and pinholes are filled properly.	
12	Application of first coat of Paint as per manufacturers recommendation.	
13	Line between two color shades is straight, no Brush marks should be visible.	
D. Application of External Paint		
14	Ensure application of Primer as per manufacturers recommendation	
15	Ensure application of Filler Coats as per manufacturers recommendation	
16	Touchup, grinding, undulations, corner repairs and pinholes are filled properly.	
17	Application of final coat of Texture Paint as per manufacturers recommendation.	
18		
Comments:		
Checked by:		
<u>Civil Engineer</u> Name _____ Position: <u>Sr. Project Engineer</u> Signature _____ Date <u>0/Jan/00</u>		
<u>QC Engineer</u> Name _____ Position: <u>QC Engineer</u> Signature _____ Date <u>0/Jan/00</u>		



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CERAMIC TILING CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
A. General			
1 Ensure method statement, materials and drawings (finishing schedule) are approved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ensure materials are stored as per manufacturers recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Verify the expiry date of the material prior to applications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Surface Preparation			
4 Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and greese.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Check surface is levelled and sloped as per the approved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check the surface roughness is appropriate as per the tile and tile adhesive manufacturer recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Verify the application of wet area water proofing and leak test.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Verify the location and level of floor drain as per the approved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Check the MEP clearance prior to start Painting works.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Installation of Tile			
10 Ensure proper mixing of material as per the manufacturer recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Check the Location, Colour & Type of tile as per the approved shop drawings / material submittal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Check the application of tile adhesive using notch trowel on the backside of tile and over the substrate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Verify the tile spacers width is uniform and aligned as per the appoved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Check the setting out / pattern of wall and floor tiles as per the approved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Verify the slope and level of the tiles as per the approved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check the laying of tiles above the false ceiling as per the approved drawings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Check the pull off / adhesion test for the paint application as per the project specifications / manufacturer recommendations (if required).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Approval to proceed with further works obtained from consultant / Client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Grouting of Tile			
19 Check the tile joints are clean and free from contaminants like dust etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Ensure proper mixing of material as per the manufacturer recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21 Check the Location, Colour & Type of grout as per the approved shop drawings / material submittal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22 Check the width of tile grout is proper and uniform.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23 Check the application of tile grout as per the manufacturer recommendations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24 Approval to proceed with further works obtained from consultant / Client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Checked by:

Civil Works

Name _____ Position: _____ Signature: _____ Date: _____

Sub Contractor

Name _____ Position: _____ Signature: _____ Date: _____



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BITUMEN PAINT APPLICATION CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y N N/A
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A. General

- 1 Ensure method statement and materials are approved.
- 2 Ensure materials are stored under dry, clean, shaded area, away from sunlight and other sources of heat.
- 3 Check the expiry date of the material prior to applications.

B. Surface Preparation

- 4 Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and greese.
- 5 Check for repair of surface imperfection and protrusions (if any).
- 6 Check the angle fillets and chamfering of all sharp edges (if required).
- 7 Check the MEP clearance are obtained prior to start bitumen application.

C. Application of Bitumen Paint

- 8 Ensure proper mixing as per the manufacturer recommendations.
- 9 Check the application of primer coat (if required).
- 10 Check the rate of application as per the manufacturer recommendation and method statement.
- 11 Check the application of coats as per project requirements / manufacturer recommendations.
- 12 Check the application of subsequent coats are carried out at right angle to the previous coat.
- 13 Check the WFT as per the project specifications / manufacturer recommendations.
- 14 Check the curing of application as per manufacturer recommendation.
- 15 Approval obtained from Consultant/Client to proceed with further activities.

Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Sub Contractor

Name _____ Position: _____ Signature _____ Date _____



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GYPSUM PARTITION INSTALLATION CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	
Client	: AMAALA COMPANY	Insp. No.:
Consultant	: SAUDI ARABIAN PARSONS LTD	Date:
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Location:
Sub-Contractor	:	Element:

Reference Documents (Specifications, Drawings, others...),

Activity/Item:

A. General

- 1 Ensure method statement, material submittal and drawings are approved.
- 2 Ensure materials (Gypsum board, cement board, insulation material, supporting system, etc.) are stored under dry, clean, shaded area, away from sunlight and other sources of heat.
- 3 Check the color, type, material, fire rating and thickness are as per approved material approval and project requirements.
- 4 Verify and record the DCL product conformity certificate for the insulation materials.

B. Setting Out

- 5 Verify the marking and setting out of the partition walls as per the approved drawings.

C. Installation Activity

- 6 Verify the completion of the required finishes of the adjacent substrates.
- 7 Verify the location, spacing and fixation of the supporting grid (vertical and horizontal channel, wall angle, etc.) as per the approved drawings.
- 8 Verify the fixation of the board (on one side of the supports) as per the approved drawings.
- 9 Ensure the completion of all embedded MEP and other discipline works prior to closure as per the approved drawings.
- 10 Ensure additional supports are provided for the wall mounted fixtures as applicable.
- 11 Verify the installation of insulation works (if applicable) as per the approved drawings.
- 12 Obtain approval (Civil / MEP) from consultant / Client to proceed with further works.
- 13 Verify the fixation of the board as per the approved drawings.
- 14 Ensure the completion of MEP and other discipline works above the false ceiling level and obtain clearance to proceed for further works.
- 15 Verify the marking, position and alignment of MEP & wall mounted fixtures in the wall as per the approved drawings.
- 16 Ensure the cutting of gypsum board on the marked locations as per the project requirements.
- 17 Verify the jointing & taping as per the manufacturer recommendations.
- 18 Approval obtain from Consultant/Client to proceed with further activities.

Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Name _____ Position: _____ Signature _____ Date _____



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FALSE CEILING INSTALLATION CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:		Y	N	N/A
A. General				
1 Ensure method statement, material submittal and drawings are approved.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ensure materials (Gypsum board, tiles, suspension systems, etc.,) are stored under dry, clean, shaded area, away from sunlight and other sources of heat.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check the color, type, material, pattern and thickness are as per approved material approval and project requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Setting Out				
4 Verify the marking of the false ceiling level on the walls as per the approved drawings.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Verify the marking / location of suspension system supports at ceiling as per the approved drawings.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Pre-Installation Activity				
6 Verify the completion of the required finishes above the false ceiling level.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Verify the closing of shaft openings, MEP penetrations and other openings as per project requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Verify the application of fire sealant / fire protection works are carried out as per the project requirements (if applicable).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Verify the location, spacing and fixation of the grid (main channel, Furing channel, wall angle, hanging wire with adjustable clip, main tee, cross tee, etc.,) as per the approved drawings.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Ensure the suspension system supports are not in contact with the adjacent MEP services.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Ensure the completion of MEP and other discipline works above the false ceiling level and obtain clearance to proceed for further works.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Ensure additional supports are provided for the ceiling mounted fixtures as applicable.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Obtain approval from consultant / Client to proceed with further works.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Installation of False Ceiling				
14 Verify the type, fixation, level and alignment of the false ceiling board / tiles as per the approved drawings.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Verify the marking, position and alignment of MEP & ceiling mounted fixtures (light, access panel, sprinklers, signages etc.) in the ceiling as per the approved drawings.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Ensure the cutting of gypsum board / tiles on the marked locations as per the project requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Verify the jointing & taping as per the manufacturer recommendations.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Approval obtained from Consultant/Client to proceed with further activities.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Sub Contractor

Name _____ Position: _____ Signature _____ Date _____



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AMANA.

WET AREA WATERPROOFING CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:		Y	N	N/A
A. General				
1 Ensure method statement and materials are approved.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ensure materials are stored under dry, clean, shaded area, away from sunlight and other sources of heat.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check the expiry date of the material prior to applications.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Surface Preparation				
4 Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and grease.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Ensure grouting, angle fillet provided all around the penetrations and the projected MEP services are neat and clean from any latiance.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Ensure the angle fillets are provided at the floor and wall junctions of the area that to be treated.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Obtain MEP clearance prior to start the wet area water proofing.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Ensure check dam constructed at the entrance of the room for the stagnation of water for water leakage testing after the completion of the wet area water proofing.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Application of Waterproofing				
9 Ensure proper mixing of the material as per the manufacturer recommendations		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Check the application of primer coat (if required).		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Check the rate of application as per the manufacturer recommendation and method statement.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Check the application of coats as per project requirements / manufacturer recommendations.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Check the application of subsequent coats are carried out at right angle to the previous coat.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Ensure the application of waterproofing on the vertical face extended upto 300mm from FFL or as per approved drawing / project requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Check the WFT as per the project specifications / manufacturer recommendations.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16 Check the curing of application as per manufacturer recommendation.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17 Obtain approval for the application of waterproofing to proceed water leakage test.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18 Check the filling of water and monitor the level of filled water during the leakage test.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19 Check for any water seepage / leakage after 24 hours or as per the project requirements.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20 Approval obtained from Consultant/Client to proceed with further activities.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

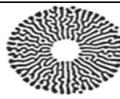
Checked by:

Civil Works

Name _____ Position: _____ Signature: _____ Date: _____

Sub Contractor

Name _____ Position: _____ Signature: _____ Date: _____



AMAALA



AMANA

EPOXY FLOORING CHECKLIST

Project	: AMAALA STAFF VILLAGE ZONE-05	Insp. No.:	0
Client	: AMAALA	Date:	0/Jan/00
Consultant	: PARSONS	Location:	Dubox Factory
Contractor	: Suadi Amana Contracting Co	Box:	0
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
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A. General

1	Ensure method statement, materials and drawings (finishing schedule) are approved.		
2	Ensure materials are stored as per manufacturers recommendations.		
3	Verify the expiry date of the material prior to applications.		

B. Surface Preparation

4	Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and greese.		
5	Check for repair of surface imperfection and protrusions (if any).		
6	Moisture content for the substrate and environmental conditions as per manufacturer recommendations.		
7	Undulations or irregular corners are repaired and grinded as required.		
8	Check the MEP clearance prior to start epoxy flooring works.		

C. Application of Epoxy

9	Ensure application of primer as per manufacturers recommendation		
10	Ensure application of Hardner as per manufacturers recommendation		
11	Ensure Application of uniform base as per manufacturers recommendations.		
12	Tuchup, grinding, undulations, corner repairs and pinholes are filled properly.		
13	Ensure proper mixing of material as per the manufacturer recommendations.		
14	Check the Location, Colour, Type of Painting as per the approved shop drawings / material submittal.		
15	Check the application of coats as per project requirements / manufacturer recommendations.		
16	Check the rate of application as per the manufacturer recommendation and method statement.		
17	Check the curing at every stages of application as per manufacturer recommendation.		
18			

Comments:

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Checked by:Civil Engineer

Name	Mr. Mahmoud	Position:	Project Engineer	Signature	Date	0/Jan/00
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QC Engineer

Name	0	Position:	QC Engineer	Signature	Date	0/Jan/00
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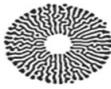
AMAALA



AMANA

KITCHEN CABINETS INSTALLATION CHECKLIST

Project	: AMAALA STAFF VILLAGE ZONE-05			Insp. No.:	0	
Client	: AMAALA			Date:	0/Jan/00	
Consultant	: PARSONS			Location:	Dubox Factory	
Contractor	: Suadi Amana Contracting Co			Box:	0	
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC					
Reference Documents (Specifications, Drawings, others...),						
Activity/Item: Y N N/A						
A. General						
<input type="checkbox"/>	1	Ensure method statement, materials and drawings are approved.				
<input type="checkbox"/>	2	Ensure materials are stored as per manufacturers recommendations.				
<input type="checkbox"/>	3	Ensure method of statement is being followed.				
B. Surface Preparation						
<input type="checkbox"/>	4	Check location,Size,Color and Thickness of the Cabinets				
<input type="checkbox"/>	5	Check Height,Level and Alignment of cabinets				
<input type="checkbox"/>	6	Check Opening Size and Direction of cabinets				
<input type="checkbox"/>	7	Check Shelf Supports (Brackets or Pins)				
<input type="checkbox"/>	8	Check Joints of the Cabinets				
<input type="checkbox"/>	9	Check whether Drawer and Shelf functioning properly				
<input type="checkbox"/>	10	Fixing of supports for the countertop is as per approved drawings				
<input type="checkbox"/>	11	Check Ironmongery is installed as per drawing and free from damages				
<input type="checkbox"/>	12	Check Sink installed Properly and as per location on dwg.				
<input type="checkbox"/>	13	Check Stove installed Properly				
<input type="checkbox"/>	14	Completion of Nearby Finishes				
C. Cabinet Counter Top						
<input type="checkbox"/>	15	Check location,Size,Color and Thickness				
<input type="checkbox"/>	16	Check Opening Size and location for kitchen Accessories				
<input type="checkbox"/>	17	Check Level of the surface				
<input type="checkbox"/>	18	Check Applied Sealant and its Color				
<input type="checkbox"/>	19	Check for any Surface joints visibility				
Comments:						
.....						
<u>Civil Engineer</u>						
Name	<hr/>		Position:	Project Engineer	Signature	<hr/> Date 0/Jan/00
<u>QC Engineer</u>						
Name	<hr/>		Position:	QC Engineer	Signature	<hr/> Date 0/Jan/00



AMAALA



AMANA

WARDROBE INSTALLATION CHECKLIST

Project	: AMANA STAFF VILLAGE ZONE-05	Insp. No.:	0
Client	: AMAALA	Date:	0/Jan/00
Consultant	: PARSONS	Location:	Dubox Factory
Contractor	: Saudi Amana Contracting Co	Box:	0
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
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A. General

1	Ensure method statement, material submittal and drawings are approved.			
2	Ensure materials (wardrobe, leaf, drawers , iron mongeries and accessories, etc.) are stored under dry, clean, shaded area, away from sunlight and other sources of heat.			
3	Check the color, type, material, coating of leaf, materials are as per approved material approval and project requirements.			
4	Verify and record the DCL product conformity certificate for the sealants to be used.			
5	Ensure the fire rating of the wardrobe are as per the project requirements.			

B. Setting Out

6	Verify the level and alignment of the wardrobe frame leaf opening with reference to the surrounding wall / cladding elevations.			
7	Verify the location and clear opening of leafs and drawers are as per the approved drawings.			
8	Verify the wardrobe jamb area are solid and rigid.			

C. Installation of Wardrobe

9	Verify the fixation of subframe with applicable moisture resistant coating.(if required).			
10	Verity the fixation, level and alignment of the wardrobe is as per the approved details / drawings.			
11	Ensure the wardrobe consolidated.			
12	Ensure the location and No. of leaf hinges provided as per the approved drawings.			
13	Ensure required Iron mongery sets are provided as per drawings.			
14	Ensure the level, orientation and position of the iron mongery fixed as per the approved drawings.			
15	Ensure location/dimensions of drawers are per drawing			
17	Ensure the roller slides/drawer runners as per the approved drawings.			
18	Verify Cloth Hangers/Tie Holders are installed as per the approved drawings.			
19	Ensure the alignment, plumbness and protection of wardrobe to avoid any damages during activities.			
20	Ensure wardrobe hanging rail set is installed.			
21	Approval obtained from Consultant/Client to proceed with further activities.			

Comments:.....

Civil Engineer
Name _____ Position: _____ Project Engineer _____ Signature _____ Date 0/Jan/00

QC Engineer
Name 0 Position: QC Engineer Signature Date 0/Jan/00



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AMAALA

AMANA.

DOORS & WINDOWS INSTALLATION CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	Insp. No.:	
Client	: AMAALA COMPANY	Date:	
Consultant	: SAUDI ARABIAN PARSONS LTD	Location:	
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Element:	
Sub-Contractor	:		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
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A. General

- 1 Ensure method statement, material submittal and drawings are approved.
- 2 Ensure materials (Door frame, leaf, window frame, window leaf, iron mongeries and accessories, etc.) are stored under dry, clean, shaded area, away from sunlight and other sources of heat.
- 3 Check the color, type, material, coating of door and window materials are as per approved material approval and project requirements.
- 4 Verify and record the DCL product conformity certificate for the sealants to be used.
- 5 Ensure the fire rating of the doors are as per the project requirements.

B. Setting Out

- 6 Verify the location and clear opening of doors / windows are as per the approved drawings.
- 7 Verify the level and alignment of the door / window frame opening with reference to the surrounding wall / cladding elevations.
- 8 Verify the door / window jamb area are solid and rigid.

C. Installation of Doors

- 9 Verify the fixation of subframe with applicable moisture resistant coating.(if required).
- 10 Verify the fixation, level and alignment of the door frame as per the approved details / drawings.
- 11 Ensure the door frames are consolidated using foam as per the material approval and project requirements.
- 12 Ensure the location and No. of Door hinges provided as per the approved drawings.
- 13 Ensure required Iron mongery sets are provided as per the door schedule drawings.
- 14 Ensure the level, orientation and position of the iron mongery fixed as per the approved drawings.
- 15 Ensure the door stopper / door coordinator provided as per the approved door schedule.
- 16 Ensure the fire rated doors are provided with fire rated sealant & fire rating tags as per the project requirements.
- 17 Ensure the rubber gaskets are provided at the door jamb as per the approved drawings.
- 18 Verify the undercut for the door leaves as per the approved drawings.
- 19 Ensure the alignment, plumbness and protection of door leafs to avoid any damages during construction activities.
- 20 Ensure the door architrave are fixed as per the approved drawings.
- 21 Approval obtained from Consultant/Client to proceed with further activities.

D. Installation of Windows

- 22 Ensure the completion of finishes around the jamb area prior to installation.
- 23 Ensure the drip flashings are provided properly around the frame as per the approved drawings
- 24 Ensure the overlapping of the flashings around the frame are as per the approved drawings.



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DOORS & WINDOWS INSTALLATION CHECKLIST

Project : AMAALA STAFF VILLAGE – ZONE 05
Client : AMAALA COMPANY
Consultant : SAUDI ARABIAN PARSONS LTD
Contractor : SAUDI AMANA CONTRACTING CO. L.L.C.
Sub-Contractor :

Insp. No.: _____
Date: _____
Location: _____
Element: _____

- 25 Verify the fixation, level and alignment of the door frame as per the approved details / drawings.
26 Ensure the location and No. of hinges, iron mongerries provided as per the approved drawings.
27 Ensure the alignment, plumbness, opening direction and protection of window shutters to avoid any damages during construction activities.
28 Verify the uniform thickness, colour and application of the sealant all around the window frame.
29 Approval obtained from Consultant/Client to proceed with further activities.

Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Sub Contractor

Name _____ Position: _____ Signature _____ Date _____



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AMANA.

FIRE SEALING WORKS CHECKLIST

Project	: AMAALA STAFF VILLAGE – ZONE 05	
Client	: AMAALA COMPANY	Insp. No.:
Consultant	: SAUDI ARABIAN PARSONS LTD	Date:
Contractor	: SAUDI AMANA CONTRACTING CO. L.L.C.	Location:
Sub-Contractor	:	Element:

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y	N	N/A
A. General			
1 Ensure relevant shop drawing is approved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Ensure H&S method statement is submitted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Check all the materials are approved by consultant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Check the availability mockup approval for the fire sealing works (around penetrations, partitions, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Preparation Works			
5 Check the MEP penetrations are installed, inspected and approved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Check the surface for any latiance, dirt, loose materials around the penetrations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Check the dampness of the substrate prior to application (if required as per manufacturer recommendations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Check the mixing of materials as per the manufacturer recommendations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Application			
9 Check the application covers the whole penetrations without any gap.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Finishing of the openings shall be as per the approved mockup.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Check the final cleaning and sealant (if required) applied as per the approved mockup.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

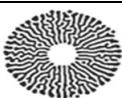
Checked by:

Civil Works

Name _____ Position: _____ Signature _____ Date _____

Sub Contractor

Name _____ Position: _____ Signature _____ Date _____



AMAALA



AMANA

ALUMINIUM & GLAZING CHECKLIST

Project	: AMAALA STAFF VILLAGE ZONE-05	Insp. No.:	0
Client	: AMAALA	Date:	0/Jan/00
Consultant	: PARSONS	Location:	Dubox Factory
Contractor	: Suadi Amana Contracting Co	Box:	0
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		

Reference Documents (Specifications, Drawings, others...),

Activity/Item:	Y N N/A
----------------	---------------

A. General

1	Ensure method statement, materials and drawings (finishing schedule) are approved.		
2	Ensure materials are stored as per manufacturers recommendations.		
3	Verify the expiry date of the material prior to applications.		

B. Surface Preparation

4	Check substrate is clean, free from contaminants like dust, traces of curing compound, oil and greese.		
5	Check for repair of surface imperfection and protrusions (if any).		
6	Ensure the protection of nearby finishes / MEP services.		
7	Check the MEP clearance prior to start of aluminium works.		

C. Installation of Aluminium and glazing

8	Profile and glass country of origin / Manufacturer		
9	Type, Size, Colour, Thickness and Opening Direction		
10	Verify Size of opening as per drawing		
11	Verify Location of opening for curtain wall, door and windows as per drawing		
12	Ironmongery is installed and free from damages		
13	Sealant is applied properly		
14	water leak test is performed and no leakage is found		
15	verify Functioning/movement of panels is as free as required		
16	Verify the Rigidity of frame and moveable panels		
17	Verify Line and Level		

Comments:

.....

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Checked by:

Civil Engineer

Name _____ Position: Project Engineer Signature _____ Date 0/Jan/00

Qc Engineer

Name _____ 0 Position: QC Engineer Signature _____ Date 0/Jan/00



AMAALA



PARSONS

AMANA

CHECK LIST FOR PRE-LOADING OF COMPLETED PRECAST MODULAR

Project	: AMAALA STAFF VILLAGE ZONE-05			
Client	: AMAALA			
Consultant	: PARSONS			
Contractor	: Suadi Amana Contracting Co			
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC			
Reference Documents (Specifications, Drawings, others...),				
Activity/Item:				
1. General		Y	N	N/A
1.1	Ensure method statement, ITP, materials and shop drawings are approved			
1.2	Check identification tag of the modular			
1.3	Visually inspect the modular for any defects or damages			
1.4	Verify the method of loading as per the project / design requirements			
2. Final Inspection - Structural				
2.1	Internal and External Dimensions of the modular			
3. Internal and External Painting				
3.1	Location and color of Painting as per the App Drawing			
3.2	Internal Paint (Application of Primer, Stucco and 1st Coat of Paint)			
3.3	External Paint(Application of Primer, Filler and Final Coat Texture Paint)			
3.4	Ensure Paint touch ups are completed around installed items.			
3.5	Bitumin Applied at required Areas			
3.6	Damages, if any			
4. Floor and Wall Tiling				
4.1	Layout and Fixing of Tiles as per App Drawing			
4.2	Line, Level and Spacer for the Installed Tiles			
4.3	Skirting is installed/fixed properly and truly vertical			
4.4	Grouting of all Joints is done properly			
4.5	Elastomeric sealant under skirting is provided properly			
4.6	Cleaning of corners and edges removing excessive paint on skirting			
4.7	Ensure Drainhole are free from any debris and properly closed (if applicable)			
4.8	Damages, if any			
5. Dry wall				
5.1	Layout, location and position of dry wall is as per App Drawing			
5.2	Thickness of Dry wall is as per App Drawing			
5.3	Opening for MEP services are cut properly.			
5.4	Ensure Gypsum surface are Crackfree at joints.			
5.5	Damages, if any			
6. False Ceiling Work				
6.1	Layout of False Ceiling tiles and bulk head as per App Drawing			
6.2	Height of the False Ceiling as per App Drawing			
6.3	Access panels/ Ceiling tiles are Fixed Properly			
6.4	Ensure Gypsum surface are Crackfree at joints.			
6.5	Damages, if any			
7. Aluminium and Glazing Works				
7.1	Location of Window as per App Drawing			
7.2	Fixing of Glass/panels			
7.3	Fixing of Iron-Mongery and Accessories			
7.4	Fixing of Silicone Sealant			
7.5	Water leak test performed and passed.			
7.6	Paint touch completed around the frame.			
7.7	Damages, if any			



AMAALA



AMANA

CHECK LIST FOR PRE-LOADING OF COMPLETED PRECAST MODULAR

Project	: AMAALA STAFF VILLAGE ZONE-05																																																																								
Client	: AMAALA																																																																								
Consultant	: PARSONS																																																																								
Contractor	: Suadi Amana Contracting Co																																																																								
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC																																																																								
8. Wooden/Metal Doors and Wood Works <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>8.1</td><td>Location of Doors as per App Drawing</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.2</td><td>Direction of doors swing as per App Drawing</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.3</td><td>Main entrance door as per App Drawing</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.4</td><td>Lock of Main entrance door is installed</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.5</td><td>Architraves are fixed as per Drawing around main entrance door</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.6</td><td>Pod door is installed as per App Drawing</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.7</td><td>Lock of Main Pod door is installed</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.8</td><td>Architraves are fixed as per Drawing around Pod door</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.9</td><td>Locking of Doors and Shutters securely to avoid movement during transportation</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.10</td><td>Kitchen cabinets, counter top and accessories installed as per app drawing</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.11</td><td>Kitchen sink and sink mixer installed</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.12</td><td>Wardrobe installed as per approved drawings</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.13</td><td>Wardrobe doors and drawers functioning smoothly and free from scratches</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>8.12</td><td>Damages, if any</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>				8.1	Location of Doors as per App Drawing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.2	Direction of doors swing as per App Drawing	<input 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top and accessories installed as per app drawing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.11	Kitchen sink and sink mixer installed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.12	Wardrobe installed as per approved drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.13	Wardrobe doors and drawers functioning smoothly and free from scratches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.12	Damages, if any	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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9. Other Finishes <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>9.1</td><td>Mirror installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.2</td><td>Threshold installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.3</td><td>Glass Partition installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.4</td><td>Floor drain and covers installed and free from damages</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.5</td><td>Vanity installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.6</td><td>WC and cover installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.7</td><td>Shower installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.8</td><td>Gypsum board are free from peeling off</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.9</td><td>Painted walls are clean and free from stains.</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.10</td><td>Tiles are fixed with grouting properly and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.11</td><td>Toilet accessories installed and free from damage</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>9.12</td><td>Firestop sealant, fire rated sealant & General sealant applied around penetration pipes & MEP fittings.</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>				9.1	Mirror installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.2	Threshold installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.3	Glass Partition installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.4	Floor drain and covers installed and free from damages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.5	Vanity installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.6	WC and cover installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.7	Shower installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.8	Gypsum board are free from peeling off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.9	Painted walls are clean and free from stains.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.10	Tiles are fixed with grouting properly and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.11	Toilet accessories installed and free from damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.12	Firestop sealant, fire rated sealant & General sealant applied around penetration pipes & MEP fittings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>										
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9.12	Firestop sealant, fire rated sealant & General sealant applied around penetration pipes & MEP fittings.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																					
10. Others <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>10.1</td><td>Check Final Condition of outside of the room and ensure its damage free</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>10.2</td><td>Sign the delivery note for accepting the loading of precast modular in good condition</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </table>				10.1	Check Final Condition of outside of the room and ensure its damage free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10.2	Sign the delivery note for accepting the loading of precast modular in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																												
10.1	Check Final Condition of outside of the room and ensure its damage free	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																					
10.2	Sign the delivery note for accepting the loading of precast modular in good condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																					
Comments: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>																																																																									
Checked by:																																																																									
<u>Civil Works</u>																																																																									
Name	Position:	Project Engineer	Signature :	Date 0/Jan/00																																																																					
QC																																																																									
Name	Position:	QC Engineer	Signature :	Date 0/Jan/00																																																																					



AMAALA



PARSONS

AMANA

CHECK LIST FOR PRE-LOADING OF COMPLETED PRECAST MODULAR

Project	: AMAALA STAFF VILLAGE ZONE-05	Insp. No.:	
Client	: AMAALA	Date:	
Consultant	: PARSONS	Location:	Dubox Factory
Contractor	: Suadi Amana Contracting Co	Box:	
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC		

Balance Work/Pending Items

Activity/Item:

Sr. #	Description	QTY	Discipline	Remarks (By execution team)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				

Comments:

.....

.....

.....

Checked by:

Civil Works Name _____ Position: Project Engineer Signature : _____ Date 0/Jan/00

MEP Works Name _____ Position: _____ Signature : _____ Date _____

MEP Works Name _____ Position: _____ Signature : _____ Date _____

QC Name _____ Position: _____ Signature : _____ Date _____

Name _____ Position: QC Engineer Signature : _____ Date 0/Jan/00



AMANA.
WE BUILD WITH YOU

AMAALA STAFF VILLAGE

TITLE: **Material Receiving Inspection**

DISCIPLINE:	<input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> FIRE PROTECTION <input type="checkbox"/> OTHERS:	
LEVEL OF INSPECTION:	<input type="checkbox"/> HOLD <input type="checkbox"/> WITNESS <input type="checkbox"/> REVIEW <input type="checkbox"/> OTHERS:	CHECKLIST NO.:
IRF NO.:	INSPECTION TIME:	DATE:
AREA/UNIT:		ITP REF.:
DESCRIPTION :	DRAWING NO.:	REV. NO.
INSPECTION: <input type="checkbox"/> FIRST <input type="checkbox"/> SECOND <input type="checkbox"/> THIRD	REV. NO.	

ITEM No.	Activity	YES (v)	NO (x)	N/A	RE-INSPI. DATE
1	Review documents for received materials				
2	Materials outside visual checking				
3	Check for any damages (General & Visual)				
4	Verify original bill of landing / Delivery Note				
5	Supplier Certificate / Warranty letter				
6	Check and Verify the material as per delivery list / details.				
7	Check the accessories.				
8	Check the Name Plate.				
9	Materials Storage and preservation as per manufacturer.				
10	Check the identification of components.				
11	Check the rating as per approved drawing				
12	Check the loose part.				
13	Check the dimension of delivered equipment as per approved drawing.				
14	Check the availability of spare breakers / relays/ terminals.				
15	Delivered material photos.				
16	Material Site test.				

	AMANA	CONSULTANT	CLIENT
NAME			
SIGNATURE			
DATE			



AMAALA



AMANA

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline		
Installation of HVAC Duct				AA-ITP-9004-ME-02	21.11.2023	HVAC / MECH		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-9004-00		SCHEDULED INSPECTION DATE & TIME				WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks
A	Installation of HVAC Duct							
A1	Ensure the materials as per approved material submittal.			MA				
A2	Ensure drawings are used for installation are current and approved.			Approved Drawing				
A3	Check that only in properly fabricated fittings are used for changes in directions, shapes,sizes and connections.			General				
A4	The joints and flanges are correctly made, jointed and sealed.			General				
A5	Check that duct joints are sealed externally with approved sealant.			General				
A6	Check fixing of supports and spacing as approved drawings & submittal.			Approved Drawing				
A7	Check acoustic lining is properly fastened and un damaged.			General				
A8	Check nuts, bolts, screws, brackets drop rods etc. are tight and aligned properly.			Approved Drawing				
A9	All the access doors, fire dampers,VCDs etc are installed as per approved drawings, specification and manufacturer instructions as applicable.			Approved Drawing				
A10	Ensure that the identification & labeling are provided for duct works.			Approved Drawing				
REMARKS: <hr/> <hr/> <hr/>								
REFERENCE DOCUMENTS: 1. Project Specifications Section- 233113 & 230713								
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector	Work rework may proceed	Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified		
				AMAALA REPRESENTATIVE				
				CLIENT				
				Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified	

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Installation of Above Ground Drainage Pipes				AA-ITP-8501-DR-02	07.11.2023	Drainage / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER	CONTRACTOR				
				1SV10-110C16-8100	SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-8501-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Installation of Above Ground Drainage Pipes								
A1	Ensure the materials are approved			MIR					
A2	No visible damage on the materials			General					
A3	Pipe sizes are as per approved shop drawing			Approved Drawing					
A4	Pipe layout/routing as per approved shop drawing			Approved Drawing					
A5	Slope of the pipes as per approved shop drawing			Approved Drawing					
A6	Installation as per approved method statement			Approved MTS					
A7	Sleeves are provided for the pipes passing through the walls /slabs			Approved Drawing					
A8	Check the pipes are supported well with approved clamps.			Approved Drawing					
A9	Ensure Drainage pipes are not passing above electrical services			Approved Drawing					
A10	Installed pipes are free of sag & bend			General					
A11	Drainage pipes are connected to the vent system			Approved Drawing					
A12	Pipe joints are properly made and are tight / secure			General					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specification: Section- 221300									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified
				AMAALA REPRESENTATIVE					
				CLIENT					
Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified				

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Leak Test of Above Ground Drainage Pipes				AA-ITP-8501-DR-03	07.11.2023	Drainage / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-8501-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Leak Test of Above Ground Drainage Pipes								
A1	Installation of Drainage Pipe has completed			Approved Drawing					
A2	All pipe joints shall be inspected.			General					
A3	Drainage pipe should generally be subjected to an internal pressure test of 3m head of water above the crown of the pipe at the high end			Project specification					
REMARKS:									
REFERENCE DOCUMENTS: 1. Project Specification: Section- 221300									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified

Test Report				TEST REPORT REF.No	PREPARED DATE	DECipline		
Installation and Tesing of Above Ground Drainage Pipes and fittings						Drainage/ MECH		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-8501-00			SCHEDULED INSPECTION DATE & TIME			WIR		
COMPANY INSPECTION LEVEL W			CONTRACTOR INSPECTION LEVEL H			<input type="checkbox"/> Accepted		
						<input type="checkbox"/> Rejected		
SNO	ITEM					REMARKS		
1	Site Location: Dubox Factory							
2	System to be Tested: Drainage							
3	Test Fluid: Potable water							
4	Duration of Test: 4 Hours							
5	Start Time of Test:							
6	Finish Time of Test:							
Test Result:			Satisfactory <input type="checkbox"/>	Not Satisfactory <input type="checkbox"/>				
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed	QC Record Review		Work Verified
				AMAALA REPRESENTATIVE				
				CLIENT				
Name, Initial & Date	T&I Witnessed		QC Record Review			Work Verified		

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline		
Installation Above ground Water Supply pipes and fittings				AA-ITP-8001-WS-02	07.11.2023	Water Supply / MECH		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-8001-00		SCHEDULED INSPECTION DATE & TIME				WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks
A	Installation of Above ground Water Supply pipes and fittings							
A1	Ensure the materials are approved			MIR				
A2	No visible damage on the materials.			General				
A3	Pipe sizes are as per approved shop drawing.			Approved Drawing				
A4	Pipe layout/routing as per approved shop drawing.			Approved Drawing				
A5	Installation as per approved method statement.			Approved MST				
A6	Sleeves are provided for the pipes passing through the walls /slabs.			General				
A7	Check the Horizontal pipes are supported well and with approved clamps.			Approved Drawing				
A8	Check the vertical riser of the pipes are supported well with approved clamp.			General				
A9	Water pipes are not passing above electrical services.			General				
A10	Installed pipes are free of sag & bend.			General				
A11	Pipe joints are properly made and are tight / secure			General				
REMARKS:								
REFERENCE DOCUMENTS:								
1. Project Specification: Section- 221116								
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified
				AMAALA REPRESENTATIVE				
				CLIENT				
				Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Testing of Above ground Water Supply pipes and fittings				AA-ITP-8001-WS-03	07.11.2023	Water Supply / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER	CONTRACTOR				
				1SV10-110C16-8100	SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-8001-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Testing of Above ground Water Supply pipes and fittings								
A1	Installation of Water Supply pipes completed			Approved Drawing					
A2	Ensure Pressure Gauge used is Calibrated			Calibration Certificate					
A3	The system shall be subjected to a hydrostatic pressure test, to the satisfaction and in the presence of the Engineer. Pressure shall be 1.5 times than working pressure			Project Spec.-221116					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specification: Section- 221116									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector	Work rework may proceed	Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified			
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified		

Test Report				TEST REPORT REF.No	PREPARED DATE		DECipline			
Installation and Tesing of Above Ground Water Supply Pipes and fittings					07.11.2023		Water Supply / MECH			
PROJECT TITLE				CONTRACT NUMBER		CONTRACTOR				
AMAALA STAFF VILLAGE - ZONE05				1SV10-110C16-8100		SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-8001-00			SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W			CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
SNO	ITEM							REMARKS		
1	Site Location: Dubox Factory									
2	System to be Tested: Water Supply									
3	Test Fluid: Potable water									
4	Test Pressure (Bar): 8 Bar									
5	Duration of Test: 2 Hours									
6	Start Time of Test:									
7	Finish Time of Test:									
Pressure Gauge Ref:										
Calibration Certificate Ref:										
Calibration Certificate validity:										
Test Result:			Satisfactory <input type="checkbox"/>		Not Satisfactory <input type="checkbox"/>					
Contractor / Third Party				PMC REPRESENTATIVE						
QC INSPECTOR				PMC						
Name, Initial & Date	<input type="checkbox"/>	Performed Inspector	<input type="checkbox"/>	Work rework may proceed	Name, Initial & Date	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified
				AMAALA REPRESENTATIVE						
				CLIENT						
				Name, Initial & Date	<input type="checkbox"/>	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Installation of Above Ground Fire Fighting pipes system				AA-ITP-6001-FP-02	07.11.2023	Fire Fighting / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-6001-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Installation of Above Ground Fire Fighting pipes system								
A1	Check the piping, fitting, installation and valves materials are as per specification and approved material submittal			MIR					
A2	Checks the piping layouts are as per the approved shop drawing and site conditions.			Approved Drawing					
A3	Check the approved supports& accessories are used for installation firefighting piping &Accessories.			MIR					
A4	Checks the distance between the supports are maintained as per specification and method statement.			Approved Drawing & MTS					
A5	Checks the proper sizing's of hangers are used as per specification.			Approved Drawing & Project Specification					
A6	Check threaded joints are provided for 2" and below and grooved fitting are provided for 2 ½" and above in piping.			Project Specification & Approved MTS					
A7	Check location / size of valves are provided as per approved shop drawing and specification.			Approved Drawing					
A8	Check unions are provided for 2" and below piping in direction of flow.			Approved Drawing					
A9	Check flexible pipe connector/expansion compensator are installed in expansion joints and equipment connections.			Approved Drawing					
A10	Check drain points are provided in lowest piping points.			Approved Drawing					
A11	Check air vents are provided in highest piping points.			Approved Drawing					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specification: Section- 211100									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector	Work rework may proceed	Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified			
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified		

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Testing of Above Ground Fire Fighting pipes and fittings				AA-ITP-6001-FP-03	07.11.2023	Fire Fighting / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-6001-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Testing of Above Ground Fire Fighting pipes and fittings								
A1	Fire fighting pipes installation completed			Approved Drawing					
A2	Ensure the Pressure Gauge used are calibrated			Calibration certificate					
A3	The system shall be subjected to a hydrostatic pressure test, to the satisfaction and in the presence of the Engineer. Pressure shall be 1.5 times than working pressure in accordance to NFPA 13. Test shall be maintained for two hours as a minimum.			Project Spec					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specification: Section- 211100									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified

Test Report				TEST REPORT REF.No	PREPARED DATE		DECipline			
Installation and Tesing of Above ground Fire Fighting Pipes and fttings					07.11.2023		Fire Fighting / MECH			
PROJECT TITLE				CONTRACT NUMBER		CONTRACTOR				
AMAALA STAFF VILLAGE - ZONE05				1SV10-110C16-8100		SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-6000-00			SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W			CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
SNO	ITEM							REMARKS		
1	Site Location: Dubox Factory									
2	System to be Tested: Fire Fighting									
3	Test Fluid: Potable water									
4	Test Pressure (Bar): 200 psi									
5	Duration of Test: 2 Hours									
6	Start Time of Test:									
7	Finish Time of Test:									
Pressure Gauge Ref:										
Calibration Certificate Ref:										
Calibration Certificate validity:										
Test Result:			Satisfactory <input type="checkbox"/>		Not Satisfactory <input type="checkbox"/>					
Contractor / Third Party				PMC REPRESENTATIVE						
QC INSPECTOR				PMC						
Name, Initial & Date	<input type="checkbox"/>	Performed Inspector	<input type="checkbox"/>	Work rework may proceed	Name, Initial & Date	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified
				AMAALA REPRESENTATIVE						
				CLIENT						
				Name, Initial & Date	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified	



AMAALA



AMANA

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline		
Installation of Refrigerant Pipe				AA-ITP-9003-ME-02	19.11.2023	HVAC / MECH		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-9003-00		SCHEDULED INSPECTION DATE & TIME				WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks
A	Installation of Refrigerant Pipe							
A1	Ensure the materials as per approved material submittal.			MA				
A2	No visible damage on the materials.			General				
A3	Pipe sizes are as per approved shop drawing.			Approved Drawing				
A4	Pipe layout/routing as per approved shop drawing.			Approved Drawing				
A5	Installation as per approved method statement.			MTS				
A6	Sleeves are provided for the pipes passing through the walls/slabs.			Approved Drawing				
A7	Check the Horizontal pipes are supported well and with approved clamps.			Approved Drawing				
A8	Check the vertical riser of the pipes are supported well with approved clamp.			Approved Drawing				
A9	Pipe joints are properly brazed with no leak			General				
A10	Ensure the proper insulation done.			Approved Drawing				
A11	Ensure the cladding and sealant on the cladding joints.			Approved Drawing				
A12	Ensure the system charged with approved refrigerant			General				
REMARKS:								
REFERENCE DOCUMENTS:								
1. Project Specifications Section- 232300								
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector	Work rework may proceed	Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified		
				AMAALA REPRESENTATIVE				
				CLIENT				
				Name, Initial & Date	T&I Witnessed	QC Record Review	Work Verified	



AMAALA



AMANA

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Pressure Testing of Refrigerant Pipe				AA-ITP-9003-ME-03	19.11.2023	HVAC / MECH			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-9003-00		SCHEDULED INSPECTION DATE & TIME					WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H					<input type="checkbox"/> Accepted		
							<input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Pressure Testing of Refrigerant Pipe								
A1	Installation of FAHU, FCU & VRF units are completed			Project Spec. - 237400 & 238129					
A2	Installation of Refrigerant pipes completed			Project Spec. - 232300					
A3	Installation inspection completed			Project Spec. - 232300					
A4	Pressure Test: After installation, charge system and test for leaks. Repair leaks and retest until no leaks exist.			Project Spec. - 232300					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specifications Section- 232300									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified

Test Report				TEST REPORT REF.No	PREPARED DATE		DECipline			
Installation and Testing of Refrigerant Pipes and fittings					07.11.2023		Fire Fighting / MECH			
PROJECT TITLE				CONTRACT NUMBER		CONTRACTOR				
AMAALA STAFF VILLAGE - ZONE05				1SV10-110C16-8100		SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-6000-00			SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W			CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
SNO	ITEM							REMARKS		
1	Site Location: Dubox Factory									
2	System to be Tested:			Refrigerant pipe						
3	Test Fluid:			Nitrogen						
4	Test Pressure (Bar):			39 bar						
5	Duration of Test:			24 hrs						
6	Start Time of Test:									
7	Finish Time of Test:									
Pressure Gauge Ref:										
Calibration Certificate Ref:										
Calibration Certificate validity:										
Test Result:			Satisfactory <input type="checkbox"/>		Not Satisfactory <input type="checkbox"/>					
Contractor / Third Party				PMC REPRESENTATIVE						
QC INSPECTOR				PMC						
Name, Initial & Date	<input type="checkbox"/>	Performed Inspector	<input type="checkbox"/>	Work rework may proceed	Name, Initial & Date	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified
				AMAALA REPRESENTATIVE						
				CLIENT						
				Name, Initial & Date	<input type="checkbox"/>	T&I Witnessed	<input type="checkbox"/>	QC Record Review	<input type="checkbox"/>	Work Verified



AMAALA



AMANA

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline		
Installation of LV Cables & Wires				AA-ITP-5005-EL-02	15.11.2023	Electrical		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-5005-00		SCHEDULED INSPECTION DATE & TIME				WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted		
						<input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks
A	Installation of LV Cables & Wires							
A1	Check all materials installed are as per approved material submittal.			MAR				
A2	Dimensions as per approved drawings			Approved Drawing				
A3	the cable/wire provided with Ties appropriately?			General				
A4	Verify measurement of lengths.			General				
A5	Ensure that there are no damages to the cables			MIR				
A6	Verify that identification, grouping, spacing, markings and clamps are as required.			Approved Drawing				
A7	Ensure the cable laying in trunking, trays and conduit installations are conducted in approved and accepted manner & as per project specification			Approved Drawing				
A8	Ensure that cable type and routes are as per approved Drawing			Approved Drawing				
A9	Ensure that correct types and sizes of wires and LV Cables are installed			Approved Drawing				
A10	Verify that routes and marked locations are correct as per approved drawings			Approved Drawing				
A11	Is cable/wire provided with Lugs?			General				
A9	Is the cable/wire termination done correctly			Approved Drawing				
A10	Before pulling wires in conduit check that inside of conduit (and raceway in general) is free of burrs and is dry and clean.			General				
A11	Ensure that extra Length left at every branch circuit outlet and pull-box, every cable passing through in order to allow inspection and for connections to be made.			General				
A12	Ensure that tightening of electrical connectors and terminals including screws and bolts, in accordance with manufacturers recommendation			General				
REMARKS:								
REFERENCE DOCUMENTS:								
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified
				AMAALA REPRESENTATIVE				
				CLIENT				
				Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified



AMAALA



AMANA

INSPECTION CHECKLIST					AMIC NUMBER	PREPARED DATE	DISCIPLINE			
Testing of LV Cables & Wires					AA-ITP-5005-EL-03	15.11.2023	Electrical			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05					CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-5005-00		SCHEDULED INSPECTION DATE & TIME					WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H					<input type="checkbox"/> Accepted			
ITEM No.	ACCEPTANCE CRITERIA				REFERENCE	PASS	FAIL	N/A	remarks	
A	Testing of LV Cables & Wires									
A1	Is the Cable/Wire Continuity test Setup, okay?				Project Spec.- 260513					
A2	Is the Cable/Wire Megger test Setup, okay?				Project Spec.- 260513					
A3	Ensure Megger test is performed for Cables and accepted				Project Spec.- 260513-1.7 C					
A4	Ensure Continuity test performed and accepted				Project Spec.- 260513-1.7 C					
REMARKS:										
REFERENCE DOCUMENTS:										
1. Project Specification: Section- 260513										
Contractor / Third Party					PMC REPRESENTATIVE					
QC INSPECTOR					PMC					
Name, Initial & Date		Performed Inspector		Work rework may proceed	Name, Intial & Date	T&I Witnessed		QC Record Review		Work Verified
					AMAALA REPRESENTATIVE					
					CLIENT					
Name, Intial & Date		T&I Witnessed		QC Record Review		Work Verified				



ELECTRICAL SYSTEMS

Box no						Type	A	
Drawing NO: NA						Calibration date -		
INSTRUMENT/ TAG ID: Insulation - Tester-					TCR No.:	1		
CIRCUIT				INSULATION RESISTANCE (MΩ)			Continuity (Ω)	
S-No.	AREA	Wire size (mm ²)	Circuit no	Phase-N	Phase-E	N-E		
1	Toilet lighting	2.5	Y1	500	500	500	OK	
2	Room Lighting	2.5	B1	500	500	500	OK	
3	FCU	4	B2	500	500	500	OK	
4	General Purpose Power-usb	4	Y3	500	500	500	OK	
5	Shaver	4	B3	500	500	500	OK	
6	Hob	6	R4	500	500	500	OK	
7	Water Kettle	4	Y4	500	500	500	OK	
8	Washing Machine	4	B4	500	500	500	OK	
9	Kitchen hood	4	R5	500	500	500	OK	
10	Water cooler/Refrigeration	4	Y5	500	500	500	OK	
11	General Purpose Power-TV	4	B5	500	500	500	OK	
12	Microwave oven	4	Y6	500	500	500	OK	
13	Living UD	4	B6	500	500	500	OK	
Test Result				Satisfactory	Not Satisfactory		<input type="checkbox"/>	

Test Result

Satisfactory

Not Satisfactory

1

Remarks If Any

Amana Operation	Amana QC	Employer / Consultant (Optional)
Name: Surya Kishore Reddy	Mohammad Wasim	
Signature:		



ELECTRICAL SYSTEMS

Box no	Type	AM					
Drawing NO: NA	Calibration date	-					
INSTRUMENT/ TAG ID: Insulation - Tester-	TCR No.:						
CIRCUIT			INSULATION RESISTANCE (MΩ)			Continuity (Ω)	
S-No.	AREA	Wire size (mm ²)	Circuit no	Phase-N	Phase-E		N-E
1	Room lighting	2.5	R1	500	500	500	OK
2	Toilet Lighting	2.5	Y1	500	500	500	OK
3	FCU	4	R2	500	500	500	OK
4	General purpose power-USB	4	R3	500	500	500	OK
5	Shaver	4	B3	500	500	500	OK
6	Water Kettle	4	R4	500	500	500	OK
7	Hob	6	Y4	500	500	500	OK
8	Washing machine	4	B4	500	500	500	OK
9	Microwave oven	4	R5	500	500	500	OK
10	Kitchen Hood	4	Y5	500	500	500	OK
11	Water Cooler/Ref	4	B5	500	500	500	OK
12	General purpose power-TV	4	R6	500	500	500	OK
13	Living-UD	4	B6	500	500	500	OK
Test Result			Satisfactory		Not Satisfactory	<input type="checkbox"/>	
Remarks If Any							

Test Result

Remarks If Any

Amana Operation	Amana QC	Employer / Consultant (Optional)
Name: Surya Kishore Reddy	Mohammad Wasim	
Signature:		

			 AMAALA				
ELECTRICAL SYSTEMS							
Box no					Type	AC & B	
Drawing NO: N/A				Calibration date		-	
INSTRUMENT/ TAG ID: Insulation - Tester- M10/131					TCR No.:		
CIRCUIT				INSULATION RESISTANCE (MΩ)			Continuity (Ω)
S-No.	AREA	Wire size (mm ²)	Circuit no	Phase-N	Phase-E	N-E	
1	Room lighting	2.5	R1	500	500	500	OK
2	Toilet Lighting	2.5	Y1	500	500	500	OK
3	FCU	4	Y2	500	500	500	OK
4	General purpose power-USB	4	R3	500	500	500	OK
5	Shaver	4	B3	500	500	500	OK
6	Water Kettle	4	Y5	500	500	500	OK
7	Hob	6	B4	500	500	500	OK
8	Washing machine	4	Y4	500	500	500	OK
9	Microwave oven	4	R5	500	500	500	OK
10	Kitchen Hood	4	B5	500	500	500	OK
11	Water Cooler/Ref	4	Y6	500	500	500	OK
12	General purpose power-TV	4	R6	500	500	500	OK
13	Living-UD	4	R4	500	500	500	OK
Test Result				Satisfactory	Not Satisfactory <input type="checkbox"/>		
Remarks If Any							
Amana Operation			Amana QC		Employer / Consultant (Optional)		
Name:	Surya Kishore Reddy		Mohammad Wasim				
Signature:							



ELECTRICAL SYSTEMS

Box no						Type	ADA	
Drawing NO: NA						Calibration date		
INSTRUMENT/ TAG ID: Insulation - Tester- M10/131					TCR No.:	1		
CIRCUIT				INSULATION RESISTANCE (MΩ)			Continuity (Ω)	
S-No.	AREA	Wire size (mm ²)	Circuit no	Phase-N	Phase-E	N-E		
1	Room lighting	2.5	R1	500	500	500	OK	
2	Toilet Lighting	2.5	Y1	500	500	500	OK	
3	FCU	4	Y2	500	500	500	OK	
4	Disabled Alarm Controller	4	Y3	500	500	500	OK	
5	General purpose power-USB	4	R3	500	500	500	OK	
6	Shaver	4	B3	500	500	500	OK	
7	Water Kettle	4	Y5	500	500	500	OK	
8	Hob	6	B4	500	500	500	OK	
9	Washing machine	4	Y4	500	500	500	OK	
10	Microwave oven	4	R5	500	500	500	OK	
11	Kitchen Hood	4	B5	500	500	500	OK	
12	Water Cooler/Ref	4	Y6	500	500	500	OK	
13	General purpose power-TV	4	R6	500	500	500	OK	
14	Living-UD	4	R4	500	500	500	OK	
Test Result			Satisfactory	Not Satisfactory		<input type="checkbox"/>		
<u>Remarks If Any</u>								
Amana Operation			Amana QC		Employer / Consultant (Optional)			
Name:	Surya Kishore Reddy		Mohammed Wasim					

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline			
Installation of LV Panels				AA-ITP-5006-EL-02	21.11.2023	Electrical			
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.				
SCC-ITP NUMBER KJ-142-P-QC-ITP-5006-00		SCHEDULED INSPECTION DATE & TIME				WIR			
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected			
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks	
A	Installation of LV Panels								
A1	Verify the installed Panel boards have approved submittals.			MAR					
A2	Ensure the drawings used for installation are correct and approved.			Approved Shop Drawing					
A3	Align, level and securely fasten panelboards to structure			General					
A4	Check the Name Plate and Identification labels as per load schedule and approved submittals.			Approved Shop Drawing					
A5	Check all meters, circuit breakers, indication lamp, handles and locks are correct and undamaged.			MIR					
A6	Fix surface mounted outdoor panelboards at least 25mm from wall ensuring supporting members do not prevent flow of air.			General					
A7	Do not use connecting conduits to support panelboards.			General					
A8	Panelboard Interiors: Do not install in cabinets until all conduit connections to cabinet have been completed			General					
A9	Wiring: Inside Panelboards: Neatly arranged, accessible and strapped to prevent tension on circuit breaker terminals. Tap-off connections shall be split and bolted type, fully insulated.			General					
A10	Equipment grounding for LV Panel Board is provided			Approved Shop Drawing					
A11	Ensure that all unused openings are closed in the panels			General					
A12	Ensure that updated circuit directory and other relevant documents provided in the panel directory accordingly.			Approved Shop Drawing					
A13	Ensure that the Panel fixing bolts have been tightened with the suitable nut and washer.			General					
A14	Touch up and cleaning of the panel			General					
A15	Ensure that each Panel Marking should be done as per approved drawing			Approved Shop Drawing					
REMARKS:									
REFERENCE DOCUMENTS:									
1. Project Specification: Section- 262416									
Contractor / Third Party				PMC REPRESENTATIVE					
QC INSPECTOR				PMC					
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified
				AMAALA REPRESENTATIVE					
				CLIENT					
				Name, Initial & Date	T&I Witnessed		QC Record Review		Work Verified



AMAALA



AMANA

INSPECTION CHECKLIST				AMIC NUMBER	PREPARED DATE	DECipline		
Installation of Conduits & accessories				AA-ITP-5004-EL-02	15.11.2023	Electrical		
PROJECT TITLE AMAALA STAFF VILLAGE - ZONE05				CONTRACT NUMBER 1SV10-110C16-8100	CONTRACTOR SAUDI AMANA CONTRACTING CO.			
SCC-ITP NUMBER KJ-142-P-QC-ITP-5004-00		SCHEDULED INSPECTION DATE & TIME				WIR		
COMPANY INSPECTION LEVEL W		CONTRACTOR INSPECTION LEVEL H				<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected		
ITEM No.	ACCEPTANCE CRITERIA			REFERENCE	PASS	FAIL	N/A	remarks
A	Installation of Conduits & accessories							
A1	Check the conduits and accessories are as per approved material submittal.			MA				
A2	Check and ensure the drawings used for installation are current and approved.			Approved Shop Drawing				
A3	Check the conduits and other associated material are new and undamaged.			MIR				
A4	Check that the conduits are leveled and aligned properly.			General				
A5	Check that the conduits are securely fixed.			General				
A6	Check and ensure that the conduits and back boxes are sizely adequated.			Approved Shop Drawing				
A7	Check that the bottom hight of the back boxes is as per the shop drawing.			Approved Shop Drawing				
A8	Check that a minimum of 5mm thick cover is provided for conduits concealed in walls.			General				
A9	Check the installation of conduits is co-ordinated with other services.			Approved Shop Drawing				
A10	Check the installation of conduiting as per approved drawings.			Approved Shop Drawing				
REMARKS:								
REFERENCE DOCUMENTS:								
1. Project Specification: Section- 260533								
Contractor / Third Party				PMC REPRESENTATIVE				
QC INSPECTOR				PMC				
Name, Initial & Date	Performed Inspector		Work rework may proceed	Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified
				AMAALA REPRESENTATIVE				
				CLIENT				
Name, Initial & Date	T&I Witnessed		QC Record Review	Work Verified				



PARSONS



CHECK LIST FOR PRE-LOADING OF COMPLETED PRECAST MODULAR (MEP)

Project	AMAALA STAFF VILLAGE			Insp. No.:			
Client				Date:			
Consultant				Location:			
Contractor	: Saudi Amana Contracting Co			Dubox Factory			
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC			Box			
Reference Documents (Specifications, Drawings, others...),							
General				Y	N	N/A	Remarks(if Any)
1	Check identification tag of the modular						
2	Visually inspect the MEP Services for any defects or damages						
Final Inspection - Mechanical							
Final Inspection - HVAC							
1	Installation of Supply Duct						
2	Installation of Return Duct						
3	Installation of Fresh Air Duct						
4	Installation of Exhaust Air Duct						
5	Installation of Kitchen Hood and Flexible Duct						
6	Installation of VCD						
7	Installation of Fan Coil Unit						
8	Installation of Fire Damper and Back Draft Damper						
9	Installation of Grills/Diffuser						
Final Inspection - Refrigerant pipes							
10	Installation of Pipes and fittings						
11	Insulation of pipe						
12	Check Pipe Insulation and adhesive.						
13	Pressure testing of the Piping						
Final Inspection - Firefighting							
15	Application of Primer paint						
16	Application of Paint final coating						
17	Installation of Sprinklers						
18	Pressure testing of the Piping						
Final Inspection - Water Supply							
19	Installation of Pipes and fittings						
20	Water Hammer Arrestor installed in the approved location.						
21	Pressure testing of the Piping						
22	Hot water pipes insulated.						
23	Gate Valve Installation						
24	Kitchen sink and accessories						
Final Inspection - Drainage							
23	Installation of Floor Cleanout (FCO)						
24	Installation of Floor Drain						
25	Installation CDP Pipes						
26	Piping Leak test						
27	Sleeves provided for drain pipes outlets.						
Final Inspection - Risers							
28	Soil Pipe						
29	Waste Pipe						
30	Vent Pipe						
31	Water Supply Pipe						
32	Refrigerant Pipe						
33	Firefighting Pipe						
34	Duct Riser and connection						
Comments: _____ _____ _____							
Checked by: Name _____ Date _____ QC Name _____ Date _____							



PARSONS



Contractor	: Saudi Amana Contracting Co	Location:			
Sub-Contractor	: DUBOX INDUSTRIAL PRECAST PRODUCTS LLC	Box	0		

Final Inspection - Electrical		Y	N	N/A	Remarks(if Any)
1	Check Alignment of Wiring Devices				
2	Check For ONU Panel Door				
3	Check For DB Panel Door				

Final Inspection - Wiring Devices

1	10A 1G, 2 Way switch				
2	10A 2G, 2 Way switch				
3	10A 3G, 2 Way switch				
4	Single Data Outlet -Euro face plate single keystone adaptor				
5	Twin Data Outlet -Euro face plate Duplex keystone adaptor				
6	13A, Double pole Duplex switched Power socket				
7	20 A, DP switch Washing Machine				
8	45 A, DP switch for HOB				
9	Unswitched Fused Connection Unit + cord outlet - FACP				
10	Switched Fused Connection Unit + cord outlet - Hood				
11	20 A, Cable/Flex outlet Washing Machine				
12	45 A, Cable/Flex outlet for HOB				
13	Door Bell -230V Electromechanical chime				
14	13A, DP, Simplex Switched & fused Spur Outlet for FCUs				

Final Inspection - Wire, Cables, Conduits and accessories

15	All Wires pulled as per the approved Drawings.				
16	CAT-6 Cable pulled				
17	Fire alarm Cable pulled				
18	VRV Cable pulled				
19	Main Cable pulled				
20	Smoke detector				
21	Heat detector				
22	Sensor				
23	DB Panel Tags and identification.				
24	ONU Panel installation and termination				
25	DB Panel installation and termination				
26	Thermostat				
27	PMU				

Final Inspection - Light Fittings

28	LT03 STUDIO				
29	LT9B STUDIO				
30	LT06 STUDIO				
31	LT09A LOUNGE 2				
32	C LOUNGE 2				
33	L01 GABRGE ROOM				
34	L05 ELECTRICAL ROOM				
35	L07 STAIR				
36	L08 ICT ROOM				

Comments: _____

Checked by:
 Name _____ Date _____

QC
 Name _____ Date _____