| SUBMITTAL FORM  |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|---|---|---------------|---------------|----------------------|---|---|---------------|----------|-------------|----------|---|--|------|-------|--------------|--|--|--|--|--|
|   |   |               |               |                      |   |   | (             | หมาย     | เลขที่ส่ง/S | Submitta | ittal No.                                       |  |      |       | วันที่/Date: |  |  |  |  |  |
| วัตถุประสงค์/Purpose  |   |               |               | _                    |   | ١   | WBS :         | WBS 2    | WBS 3       | WBS 4    | Type Doc  | No.                                      | Rev. |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   | L             | l Day    | view        | Approv   |   | Informati                                |      | ٦.    |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               | ] Ke     | new         | Tabbio   | at  | Intormati                                | on L | Re    | cord         |  |  |  |  |  |
| เรื่อง/Title :  |   |               |               |                      |   | ถึง/To:                                     |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| e o o o o o o o o o o o o o o o o o o o   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| ข้อกำหนด/Discipline :   |   |               |               |                      |   |   |               |          |             |          | 1 2019/1501/1                                   | Incoming N                               | lo   |       |              |  |  |  |  |  |
| ขึ้งClause:   |   |               |               |                      |   |   |               |          |             |          | เลขที่รับ/Incoming No.<br>วันที่รับ /Date       |  |      |       |              |  |  |  |  |  |
| เลขที่แบบสัญญา/Contract Drawing No. :   |   |               |               |                      |   | ANTAU / Date                                |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| จำนวนเอกสาร/Qty.  |   |               |               |                      |   |   |               |          |             | •        |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| สำหรับผู้รับจ้าง/For Contractor Use   |   |               |               |                      |   | ตัวแทนวิศวกร /Engineer's Representative Use |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      | สถานะตรวจสอบ                                      |   |               | วันส่งเล | กสารกลับ    |          |   |  |      |       |              |  |  |  |  |  |
| ลำดับที่ / Item No.   | รายละเอียด / Description                | QTY<br>(SETS) | Review Status |                      |   | JS  | Date Returned |          |             |          | หมายเหตุ/Remarks                                |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      | 1 2 3 4   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             | 1        |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   | +   | +             |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   | Ť   | T             |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   | 4             |          |             | -        |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   | +   | +             |          |             | 1        |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   | 1             |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| All items submitted have been checked, reviewed                                       |   |               |               | ส่งโดย/Submitted by: |   |   |               |          |             |          | Code:   |  |      |       |              |  |  |  |  |  |
| and co-ordinated by the Contractor. They are in                                       |   |               |               |                      |   |   |               |          |             |          |   | 1 = อนุมัติ / Approve                    |      |       |              |  |  |  |  |  |
| conformance with the requirements of the  |   |               |               |                      |   |   |               |          |             |          | 2 = อนุมัติตามบันทึก / Approve As Note          |  |      |       |              |  |  |  |  |  |
| Contract Document, except as noted, and are   |   |               |               |                      |   |   |               |          |             |          | 3 = แก้ไข-เพิ่มเติม / Edit-Comment              |  |      |       |              |  |  |  |  |  |
| approved by the Contractor for this Project.  |   |               |               |                      | ผู้จัดการโครงการ / Project Manage<br>วันที่/Date: |   |               |          |             |          | (CCSP) 4 = ไม่อนุมัติตามบันทึก / Not Acceptable |  |      |       |              |  |  |  |  |  |
| Engineer's Penresent  | rative reviewed and consent for release |               | ำนพ/Da        | te:                  |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| Engineer's Representative reviewed and consent for release<br>ตรวจสตบโดย / Checked By |   |               |               |                      | ตรวจสอบโดย / Reviewed By                          |   |               |          |             |          | อนุมัติโดย / Approved by                        |  |      |       |              |  |  |  |  |  |
| ตรวจสอบโดย / Checked By   |   |               |               |                      | 21 8 8 Y  | 0   | J orli        | J / 11   | cvicvveu    | ٠,       |   | ORMAN                                    | , /  | PPIOV | - J - J      |  |  |  |  |  |
| (   |   |               |               |                      |   |   |               |          |             |          | ) ( )   |  |      |       |              |  |  |  |  |  |
| วิศวกร/ผู้เชี่ยวชาญ / Engineer/Specilist (CSC)  |   |               |               |                      | Leader of Design Review Team (C                   |   |               |          |             |          |   | ผู้จัดการโครงการ / Project Manager (CSC) |      |       |              |  |  |  |  |  |
| วันที/Date:   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
| วินทับate:<br>จำนวนเอกสาร/Qty.  |   |               |               |                      | นที/Date:   |   |               |          |             |          |   | วันที/Date:<br>เลขที่ออก / Outgoing No.  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   | วันที่ออก/Date                              |               |          |             |          |   |  |      |       |              |  |  |  |  |  |
|   |   |               |               |                      |   |   |               |          |             |          |   |  |      |       |              |  |  |  |  |  |