

Questions? Call First Time Quality 410-451-8006

# [CompanyName]

[CompanyAddress]

[CompanyPhone]

## Contractor Quality Control (CQC) Plan

[ProjectName]

[ProjectNumber]

Management acceptance

This Construction Quality Control Plan has been reviewed and accepted.

<b>Endorsed By:</b> (Name / Title)	[CQCManagerName], CQC Systems Manager		
<b>Signature:</b>	<i>[CQCManagerName]</i>	<b>Date</b>	[Date]
<b>Version History</b>			
1.0	[Date]	Initial Issue/Date	

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# CONTRACTOR QUALITY CONTROL PLAN

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The Contractor Quality Control Plan contents correspond with USACE / NAVFAC / AFCEA / NASA UFGS-01 45 00.00 10 (November 2016, CHG 2: 11/21) version Contractor Quality Control (CQC) Plan requirements.

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## A. QUALITY CONTROL ORGANIZATION

The Project QC Organization Chart shows the QC organizational structure. Figure A-1 shows the QC Organization Chart for this project.

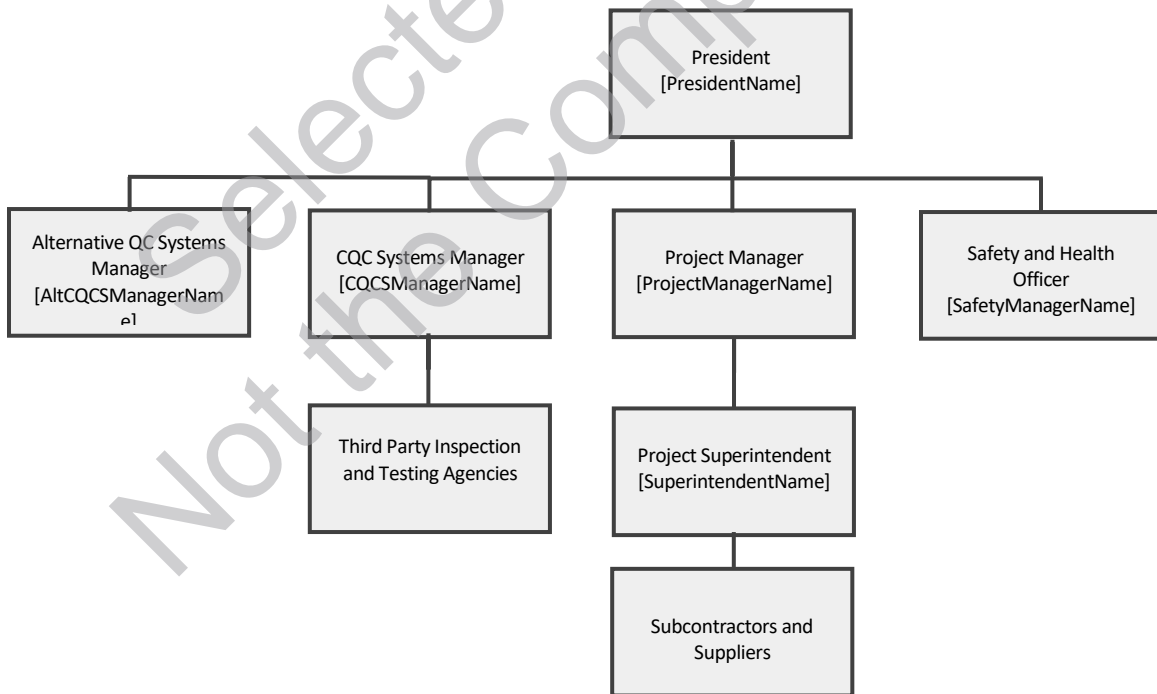
The President ensures that CQC staff maintains a presence at the site at all times during progress of the work and have complete authority and responsibility to take any action necessary to ensure Contract compliance. The CQC staff will be subject to acceptance by the Contracting Officer.

The President ensures that adequate office space, filing systems and other resources are provided as necessary to maintain an effective and fully functional CQC organization. The President ensures that all letters, material submittals, shop drawing submittals, schedules and all other project documentation will be completed promptly and furnish to the CQC organization. The CQC organization is responsible for maintaining these documents and records at the site at all times, except as otherwise acceptable to the Contracting Officer.

The President defines the organization chart for the project. The President assesses the qualification requirements for each position on the project organization chart, qualifications of each person, and then appoints only qualified persons to the project organization.

CQC staff are responsible for implementing the three-phase control system for all aspects of the work specified in the contract.

Figure A-1



## **C. APPOINTMENT LETTERS**

A Delegation of Authority Letter to the CQC Systems Manager is included as exhibits in this subsection. The Delegation of Authority Letter to the CQC System Manager is signed by an authorized official of the firm and describes the responsibilities and delegates sufficient authorities to adequately perform the functions of the CQC System Manager, including authority to stop work which is not in compliance with the Contract.

Letters of direction to all other various quality control representatives outlining duties, authorities, and responsibilities will be issued by the CQC System Manager are included as exhibits in this subsection.

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**[CompanyName]  
CQC Systems Manager Appointment Letter**

Project ID	[ProjectNumber]
Project Name	[ProjectName]
Appointed CQC Systems Manager	[CQCManagerName]

Please be advised that you are hereby appointed as CQC Systems Manager for the above referenced project. Your responsibilities include managing and implementing the [CompanyName] Quality System and the Project Contractor Quality Control (CQC) Plan regarding the referenced project. I assign you responsible for:

- Updating all required data in QCS at least daily
- Planning project quality controls required by the [CompanyName] quality systems and contract requirements
- Fully implementing all provisions of the [CompanyName] Quality System and related documents on the project.
- Manage the operation of the [CompanyName] Quality System on the project.
- Implement and manage all phases of quality control
- Communicating project-specific quality requirements to all affected departments, subcontractors and suppliers, and customers
- Ensuring that the Quality System is established and implemented by persons doing work that impacts quality
- Monitoring progress of activities
- Ensuring that the Quality System is maintained
- Acting as the project quality liaison with parties outside the company on matters relating to quality
- Reporting to senior management on performance of the Quality System, including needed improvements
- Review and approval of all project Quality System records
- Review and approval of project quality-related contract submittals
- Managing all project inspection and quality control activities
- Controlling corrective actions
- Resolving quality nonconformances

I grant you unrestricted authority for carrying out the above responsibilities including:

- Stopping work when continuing work adversely affects quality or covers up a defect
- Prevent the use of equipment or materials that would adversely affect quality or cover up a defect
- To direct the removal and replacement of any non-conforming work, equipment, or material by [CompanyName], any subcontractor, or any supplier.
- Suspend work and/or supply of materials by any staff member, subcontractor personnel, or supplier as deemed necessary to assure quality results.

President signature and date:

*[PresidentName]* / [Date]

**COMPETENT PERSON STATEMENT**

I am the designated CQC Systems Manager capable and competent to carry out the responsibilities and authority as stated above.

CQC Systems Manager signature and date:

*[CQCManagerName]* / [Date]

**[CompanyName]  
Alternate CQC Systems Manager Appointment Letter**

Project ID	[ProjectNumber]
------------	-----------------

Project Name	[ProjectName]
--------------	---------------

Appointed Alternate CQC Systems Manager	[AltCQCManagerName]
---	---------------------

Please be advised that you are hereby appointed as Alternate CQC Systems Manager for the above referenced project. Your responsibilities include managing and implementing the [CompanyName] Quality System and the Project Contractor Quality Control (CQC) Plan regarding the referenced project. I assign you responsible for:

- Planning project quality controls required by the [CompanyName] quality systems and contract requirements
- Fully implementing all provisions of the [CompanyName] Quality System and related documents on the project.
- Manage the operation of the [CompanyName] Quality System on the project.
- Implement and manage all phases of quality control
- Communicating project-specific quality requirements to all affected departments, subcontractors and suppliers, and customers
- Ensuring that the Quality System is established and implemented by persons doing work that impacts quality
- Monitoring progress of activities
- Ensuring that the Quality System is maintained
- Acting as the project quality liaison with parties outside the company on matters relating to quality
- Reporting to senior management on performance of the Quality System, including needed improvements
- Review and approval of all project Quality System records
- Review and approval of project quality-related contract submittals
- Managing all project inspection and quality control activities
- Controlling corrective actions
- Resolving quality nonconformances

I grant you unrestricted authority for carrying out the above responsibilities including:

- Stopping work when continuing work adversely affects quality or covers up a defect
- Prevent the use of equipment or materials that would adversely affect quality or cover up a defect
- To direct the removal and replacement of any non-conforming work, equipment, or material by [CompanyName], any subcontractor, or any supplier.
- Suspend work and/or supply of materials by any staff member, subcontractor personnel, or supplier as deemed necessary to assure quality results.

President signature and date:

*[PresidentName]* / [Date]

**COMPETENT PERSON STATEMENT**

I am the designated CQC Systems Manager capable and competent to carry out the responsibilities and authority as stated above.

Alternate CQC Systems Manager signature and date:

*[AltCQCManagerName]* / [Date]

**[CompanyName]  
Project Superintendent Letter of Direction**

Project ID	[ProjectNumber]
Project Name	[ProjectName]
Appointed Project Superintendent	[SuperintendentName]

Please be advised that you are hereby appointed as Project Superintendent for the above referenced project. Regardless of your other duties, in the role of Project Superintendent I assign you responsible for:

- Verification that work performed by subcontractors and suppliers and [CompanyName] work crews conforms to [CompanyName] quality standards.
- Ensuring that work meets government regulatory and code requirements, customer requirements, contract requirements, contract technical specifications, contract drawings, approved contract submittals, and company quality standards and specifications
- Ensuring that subcontractors and suppliers begin work in accordance with [CompanyName] start-work policies
- Ensuring that subcontractors and suppliers receive a notice to work only when conditions will not adversely affect quality results
- Conducting quality inspections, tests, and recording findings
- Accurately assessing subcontractor quality and on-time performance
- Ensuring that quality standards are achieved before approving subcontractor or work crew completion of work

I grant you unrestricted authority for carrying out the above responsibilities including:

- Stopping work when continuing work adversely affects quality or covers up a defect
- Prevent the use of equipment or materials that would adversely affect quality or cover up a defect
- To direct the removal and replacement of any non-conforming work, equipment, or material by [CompanyName], any subcontractor, or any supplier.
- Suspend work and/or supply of materials by any staff member, subcontractor personnel, or supplier as deemed necessary to assure quality results.

CQC Systems Manager signature and date:

*[CQCManagerName]* / [Date]

**COMPETENT PERSON STATEMENT**

I am the designated Project Superintendent capable and competent to carry out the responsibilities and authority as stated above.

Project Superintendent signature and date:

*[SuperintendentName]* / [Date]



**[CompanyName]  
Project Manager Letter of Direction**

Project ID	[ProjectNumber]
Project Name	[ProjectName]
Appointed Project Manager	[ProjectManagerName]

Please be advised that you are hereby appointed as Project Manager for the above referenced project. Your responsibilities include managing and implementing the [CompanyName] Quality System and the Project Contractor Quality Control (CQC) Plan regarding the referenced project. The Project Manager is the one person responsible for management of a specific project. I assign you responsible for:

- Demonstrating commitment to the [CompanyName] Quality System and its integrity
- Ensuring achievement of project quality objectives
- Providing adequate resources for effective operation of the Quality System on the project
- Ensuring that each project employee understands his or her quality responsibilities as well as [CompanyName] quality policies
- Conducting management reviews of the [CompanyName] Quality System.
- Ensuring the availability of necessary resources and information for effective operation of the [CompanyName] Quality System
- I grant you unrestricted authority for carrying out the above responsibilities including:
- Stopping work when continuing work adversely affects quality or covers up a defect
- Prevent the use of equipment or materials that would adversely affect quality or cover up a defect
- To direct the removal and replacement of any non-conforming work, equipment, or material by [CompanyName], any subcontractor, or any supplier.
- Suspend work and/or supply of materials by any staff member, subcontractor personnel, or supplier as deemed necessary to assure quality results.

CQC Systems Manager signature and date:

[CQCSystemManagerName] / [Date]

COMPETENT PERSON STATEMENT

I am the designated Project Manager capable and competent to carry out the responsibilities and authority as stated above.

Project Manager signature and date:

[ProjectManagerName] / [Date]

**[CompanyName]**  
**Safety and Health Manager Letter of Direction**

Project Number	[ProjectNumber]
Project Name	[ProjectName]
Appointed Safety and Health Manager	[SafetyManagerName]

Please be advised that you are hereby appointed as Safety and Health Manager for the above referenced project. Your responsibilities include managing and implementing the [CompanyName] Safety System and the Project Accident Prevention Plan regarding the referenced project.

I assign you responsibility to:

- Conduct mishap investigations and complete required reports. Maintain the OSHA Form 300 and Daily Production reports for prime and sub-contractors
- Maintain applicable safety reference material on the job site
- Attend the pre-construction conference, pre-work meetings including preparatory inspection meeting, and periodic in-progress meetings
- Implement and enforce accepted APPS and AHAs
- Maintain a safety and health deficiency tracking system that monitors outstanding deficiencies until resolution
- Post a list of unresolved safety and health deficiencies on the safety bulletin board
- Ensure sub-contractor compliance with safety and health requirements
- Fully implementing all provisions of the [CompanyName] Safety System and related documents
- Manage the operation of the [CompanyName] Safety System
- Implement and manage all phases of safety control
- Ensure company-wide effectiveness of the Safety System
- Ensure that the Safety System is established and implemented by persons doing work that impacts safety
- Ensure company-wide conformance to Safety system requirements
- Act as [CompanyName] liaison with parties outside the company on matters relating to safety
- Report to senior management on performance of the Safety System, including needed improvements
- Review and approval of all Safety System documents
- Review and approval of all Safety System records
- Review and approval of safety-related contract submittals
- Manage all project inspection and safety control activities
- Identify existing and predictable hazards

I grant you unrestricted authority for carrying out the above responsibilities including:

- Stopping work when continuing work may adversely affect safety or cover up a defect
- Preventing the use of materials that may adversely affect safety or cover up a defect
- Directing the removal and replacement of any non-conforming work or material by [CompanyName], any subcontractor, or any supplier.
- Suspending work and/or supply of materials by any staff member, subcontractor personnel, or supplier as deemed necessary to assure safety results.

CQC Systems Manager signature and date:

*[CQCManagerName]* / [Date]

COMPETENT PERSON STATEMENT: I am the designated Safety and Health Manager capable and competent to carry out the responsibilities and authority as stated above.

*[SafetyManagerName]* / [Date]

## **E. CONTROL, VERIFICATION, AND ACCEPTANCE TESTING PROCEDURES**

### **TESTING PROCEDURE**

Specified or required tests are performed to verify that control measures are adequate to provide a product which conforms to contract requirements. Upon request, the CQC Systems Manager will furnish to the Government duplicate samples of test specimens for possible testing by the Government. Testing includes operation and acceptance tests when specified. Only Corps of Engineers approved testing laboratory or an approved testing laboratory at the project site will be used.

The person or organization responsible for the testing will perform the following activities and record and provide the following data:

- Verify that testing procedures comply with contract requirements.
- Verify that facilities and testing equipment are available and comply with testing standards.
- Check test instrument calibration data against certified standards.
- Verify that recording forms and test identification control number system, including all the test documentation requirements, have been prepared.
- Record results of all tests taken, both passing and failing on the CQC report for the date taken. Specification paragraph reference, location where tests were taken, and the sequential control number identifying the test.

If approved by the Contracting Officer, actual test reports are submitted later with a reference to the test number and date taken. The CQC Systems Manager will provide an information copy of tests performed by an offsite or commercial test facility directly to the Contracting Officer. Failure to submit timely test reports as stated results in nonpayment for related work performed and disapproval of the test facility for this Contract.

### **QUALITY TESTING PLAN AND LOG**

[CompanyName] uses a Testing Plan and Log to plan, control, verify and document test performance and activity. The Quality Test Plan and Log lists the tests that will be performed on this project.

The CQC Systems Manager completes the Test Plan and Log to include the test name, specification paragraph requiring test, feature of work to be tested, and person responsible for each test. Test frequency will be indicated by the number of times a test is listed on the Test Plan and Log.

A Testing Plan and Log form is included as an exhibit in this subsection.

<b>[CompanyName] Testing Plan and Log</b>									
Project ID		Project Name				CONTRACTOR			
[ProjectNumber]		[ProjectName]				[CompanyName]			
SPECIFICATION SECTION AND PARAGRAPH NUMBER	FEATURE OF WORK	TEST REQUIRED	ACCREDITED/ APPROVED LAB YES /NO	RESPONSIBLE PERSON	TESTED BY	LOCATION OF TEST ON/OFF SITE/SITE	DATE COMPLETED	DATE FORWARDED TO CUSTOMER	REMARKS

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## **G. PROCEDURES FOR TRACKING DEFICIENCIES**

Should a deficiency be identified by an inspection, a systematic method will be used to control the item, correct it, and ensure that project quality is not adversely impacted by the event.

Deficiencies and their resolution are recorded on a Rework Items List form. A Rework Items List form exhibit is included in this subsection.

### **DEFICIENCY CONTROLS**

Should a deficiency be identified by an inspection there is a systematic method to control the item, correct it, and ensure that project quality is not adversely impacted by the event.

A deficiency is any item that does not meet project specifications or [CompanyName] Quality System requirements.

#### **MARKING OF DEFICIENCIES AND OBSERVATIONS**

When the CQC Systems Manager, Project Superintendent, inspector, or customer identifies a deficiency or an observation, the item is quickly and clearly marked by tape, tag, or other easily observable signal to prevent inadvertent cover-up.

#### **CONTROL THE CONTINUATION OF WORK**

After the item is marked, the Project Superintendent determines if work can continue in the affected area:

**CONTINUE WORK:** When continuing work does not adversely affect quality or hide the defect, work may continue in the affected area while the disposition of the item is resolved. The Project Superintendent may place limitations on the continuation of work.

**STOP WORK ORDER:** When continuing work can adversely affect quality or hide the defect, work must stop in the affected area until the disposition of the item resolved. The Project Superintendent identifies the limits of the affected area. The Project Superintendent quickly and clearly identifies the boundaries of the stop work area.

#### **RECORDING OF DEFICIENCIES**

If deficiencies or observed items exist by the feature of work completion inspection, the Project Superintendent or inspector records the deficiencies on a Rework Items List form.

The Project Superintendent sends the Rework Items List to the CQC Systems Manager.

#### **CQC SYSTEMS MANAGER DISPOSITION OF NONCONFORMANCE REPORTS**

When the CQC Systems Manager receives a Rework Items List, he or she assesses the affect the reported deficiency has on form, fit, and function. The CQC Systems Manager may assign an action of either:

**REPLACE:** The nonconformance can be brought into conformance with the original specification requirements by replacing the nonconforming item with a conforming item.

**REPAIR:** The nonconformance can be brought into conformance with the original requirements through completion of required repair operations.

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**REWORK:** The deficiency can be made acceptable for its intended use, even though it is not restored to a condition that meets all specification requirements. The CQC Systems Manager may specify standards that apply to the completion of rework. Rework nonconformances must be approved by the customer.

**USE AS-IS:** When the rework item is satisfactory for its intended use. Any use as-is items that do not meet all specification requirements must be approved by the customer.

### DEFICIENCY CORRECTIVE ACTIONS

The Project Superintendent verifies that corrective actions eliminate the deficiency to the requirements of the original specifications or as instructed by the QC Manager's action on the Rework Items List, and then removes, obliterates, or covers the deficiency marker.

Furthermore, the Project Superintendent ensures that previously completed work is reinspected for similar deficiencies and corrective actions are taken to avert future occurrences.

#### CONTROL OF CORRECTIVE ACTIONS

When a deficiency is found, the Project Superintendent ensures that:

- Previously completed work is reinspected for similar deficiencies
- Corrective actions are taken to avert future occurrences

The CQC Systems Manager identifies requirements for corrective actions with respect to frequency, severity, and detectability of quality rework items found during and after completion of work activities.

When a solution requires changes to [CompanyName] quality standards, the CQC Systems Manager makes modifications as necessary by making changes to:

- Material specifications
- Personnel qualifications
- Subcontractor and Supplier qualifications
- Company standards
- Inspection processes

#### CORRECTIVE ACTION TRAINING

The Project Superintendent initiates corrective action training to address quality deficiencies. Personnel and subcontractors and suppliers performing or inspecting work participate in the training.

Heightened awareness during quality inspections verifies and documents compliance with the corrective action improvement items. A qualified Project Superintendent inspects corrective actions during regular quality inspections and records observations on the quality inspection form.

The Project Superintendent notifies affected subcontractors and suppliers of selected preventive action training requirements.

The Project Superintendent evaluates the effectiveness of the improvements. The CQC Systems Manager reviews improvement results recorded on quality inspection records and monthly field reviews. When the CQC Systems Manager determines that the improvement actions are effective, the item is no longer treated as a preventive action.

### DEFICIENCY PREVENTIVE ACTIONS

<b>[CompanyName] Rework Items List</b>						
PROJECT ID		PROJECT NAME			CONTRACTOR	
[ProjectNumber]		[ProjectName]			[CompanyName]	
NUMBER	DATE IDENTIFIED	DESCRIPTION	CONTRACT REQUIREMENT Spec. Section and Para No., Drawing No., and Detail No. etc.	ACTION TAKEN BY QC MANAGER	RESOLUTION	DATE COMPLETED

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## **H. REPORTING PROCEDURES AND FORMAT**

On this project, [CompanyName] will use the RMS to store complete records including all documents, letters, material submittals, shop drawing submittals, schedule, and all other project documentation.

[CompanyName] will utilize the RMS CM program to record daily activities in the Daily Report tab. All documents, test reports, trip tickets, weight tickets, photographs, and SSHO daily inspection report will be scanned into RMS specific to that day of activities.

Completed reports will be maintained in RMS.

The forms in this QC Plan may be used by QC staff and field personnel but the information will be entered into RMS.

RMS shall be used to track deficiencies. Deficiencies may be recorded by Contractor QCM or by Government QA.

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## **K. COMPLETION INSPECTION**

[CompanyName] will conduct a series of completion inspections near the end of the project to assure that the project is completed to specifications. The inspections consist of a punch-out inspection, pre-final inspection, and final acceptance inspection.

A Record of each of the inspections will be maintained on the Project Completion Inspection form. If punch items are discovered during the inspection, a record of the punch items and their correction will be maintained on the Punch List form. Project Completion Inspection and Punch List form exhibits are included as an exhibit in this subsection.

### **PUNCH-OUT QC INSPECTION**

Near the end of the project, or a milestone established in the Project Quality Inspection and Test Plan, the CQC Systems Manager will inspect the completed project and verify conformance to contract specifications.

The CQC Systems Manager will use the Punch List form included as an exhibit in this subsection to prepare list punch items which do not conform to the approved drawings and specifications. The list of punch items will include the estimated date under the Due Date column by which the deficiencies will be corrected. The CQC System Manager or staff will make a second inspection to ascertain that all deficiencies have been corrected. Once this is accomplished, notify the Government that the facility is ready for the Government Pre-Final inspection.

### **PRE-FINAL CUSTOMER INSPECTION**

The Government will perform the pre-final inspection to verify that the facility is complete and ready to be occupied. A Government Pre-Final Punch List may be developed as a result of this inspection. The CQC Systems Manager will ensure that all items on this list have been corrected before notifying the Government, so that a final inspection with the customer can be scheduled.

The Superintendent will correct any items noted on the pre-final inspection in a timely manner. These inspections and any deficiency corrections required by this paragraph need to be accomplished within the time slated for completion of the entire work or any particular increment of the work if the project is divided into increments by separate completion dates.

### **FINAL ACCEPTANCE CUSTOMER INSPECTION**

The [CompanyName] inspection personnel, plus the superintendent or other primary management person, and the Contracting Officer's Representative is required to be in attendance at the final acceptance inspection. Additional Government personnel including, but not limited to, those from Base/Post Civil Facility Engineer user groups, and major commands can also be in attendance. The final acceptance inspection will be formally scheduled by the Contracting Officer based upon results of the pre-final inspection.

The CQC Systems Manager will notify the Contracting Officer at least 14 days prior to the final acceptance inspection and include the Contractor's assurance that all specific items previously identified to the

[CompanyName] Punch List						
Project ID		Project Name		Punch List Type		
[ProjectNumber]		[ProjectName]		<input type="checkbox"/> Features of Work _____		
Inspection Date		Preparer		<input type="checkbox"/> Project Final Punch <input type="checkbox"/> Pre-Final Customer Inspection <input type="checkbox"/> Final Acceptance Inspection		
Item	Location	Description	Due Date	Compl. Date	Item Completion Verification	
					Super Initial	QA Initial
Punch List Completion Date		Final QA Sign-off		Remaining Deficiencies Reported ID # and Description		

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## **L. DOCUMENTATION**

The CQC Systems Manager verifies the completeness, accuracy, and retention of project-specific Quality System records. The CQC Systems Manager maintains current records providing factual evidence that required quality control activities and tests have been performed. Forms for recording quality control activities and tests are included as exhibits in this subsection. These records will include the work of subcontractors and suppliers on an acceptable form that includes, as a minimum, the following information:

- The name and area of responsibility of the Contractor/Subcontractor.
- Operating plant/equipment with hours worked, idle, or down for repair.
- Work performed each day, giving location, description, and by whom. When Network Analysis (NAS) is used, identify each phase of work performed each day by NAS activity number.
- Test and control activities performed with results and references to specifications/drawings requirements. The control phase (Preparatory, Initial, Follow-up) as well as a list of deficiencies noted, along with corrective action.
- Quantity of materials received at the site with statement as to acceptability, storage, and reference to specifications/drawings requirements.
- Submittals and deliverables reviewed, with Contract reference, by whom, and action taken.
- Offsite surveillance activities, including actions taken.
- Job safety evaluations stating what was checked, results, and instructions or corrective actions.
- Instructions given/received and conflicts in plans and specifications. r

### **Project Quality Documents Control**

The Project Manager controls documents related to specific customer contracts including:

- Customer contracts
- Contract technical specifications
- Contract drawings
- Shop drawing submittals and approvals
- Product data submittals and approvals
- Allowances and unit price submittals and approvals
- Requests for information and customer responses
- Subcontracts
- Inspection and test plans

Project quality records will be uploaded to the RMS. Copies will be stored in the field office.

## **VERIFICATION STATEMENT**

The CQC Systems Manager will prepare and submit one daily CQC System Manager Report using the forms included as an exhibit in this subsection or other reporting forms approved by the contracting officer. The daily CQC System Manager Report will include a description of trades working on the project; the number of personnel working; weather conditions encountered; and any delays encountered. Cover both conforming and deficient features and include a statement that equipment and materials incorporated in the work and workmanship comply with the Contract.

Original and one copy will be furnished to the government daily, except that reports need not be submitted for days on which no work is performed. As a minimum, prepare and submit one report for

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every 7 days of no work and on the last day of a no work period. All calendar days need to be accounted for throughout the life of the contract. The first report following a day of no work will be for that day only.

Reports will be signed and dated by the Contractor Quality Control(CQC) System Manager. Copies of test reports and copies of reports prepared by all subordinate quality control personnel will be included within the CQC System Manager Report.

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<b>CONTRACTOR PRODUCTION REPORT</b> <small>(ATTACH ADDITIONAL SHEETS IF NECESSARY)</small>				DATE	
CONTRACT NO		TITLE AND LOCATION		REPORT NO	
CONTRACTOR			SUPERINTENDENT		
AM WEATHER		PM WEATHER		MAX TEMP (F)	MIN TEMP (F)
WORK PERFORMED TODAY					
Schedule Activity No.	WORK LOCATION AND DESCRIPTION	EMPLOYER	NUMBER	TRADE	HRS
<b>JOB SAFETY</b>	WAS A JOB SAFETY MEETING HELD THIS DATE? <small>(If YES attach copy of the meeting minutes)</small>		<input type="checkbox"/> YES	<input type="checkbox"/> NO	TOTAL WORK HOURS ON JOB SITE, THIS DATE, INCL CONT SHEETS
	WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? <small>(If YES attach copy of completed OSHA report)</small>		<input type="checkbox"/> YES	<input type="checkbox"/> NO	CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT
	WAS CRANE/MANLIFT/TRENCHING/SCAFFOLD/HV ELEC/HIGH WORK/ HAZMAT WORK DONE? <small>(If YES attach statement or checklist showing inspection performed.)</small>		<input type="checkbox"/> YES	<input type="checkbox"/> NO	TOTAL WORK HOURS FROM START OF CONSTRUCTION
	WAS HAZARDOUS MATERIAL/WASTE RELEASED INTO THE ENVIRONMENT? <small>(If YES attach description of incident and proposed action.)</small>		<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Schedule Activity No.	LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED			<input type="checkbox"/> SAFETY REQUIREMENTS HAVE BEEN MET.	
EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATE SCHEDULE ACTIVITY NUMBER)					
Schedule Activity No.	Submittal #	Description of Equipment/ Material Received			
CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER.					
Schedule Activity No.	Owner	Description of Construction Equipment Used Today (incl Make and Model)			Hours Used
Schedule Activity No.	REMARKS				
_____ CONTRACTOR/SUPERINTENDENT			_____ DATE		



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