

XYPEX QUALITY ASSURANCE PROCEDURES – XYPEX ADMIX C-1000NF
PROJECT DATA FORM

Date:

PROJECT:	XYPEX APPLICATOR:
PROJECT ADDRESS:	APPLICATOR ADDRESS:
BUILDING CONTRACTOR: ADDRESS:	SITE SUPERVISOR:
PROJECT MANAGER: ADDRESS:	CONTACT DETAILS:
DESIGN ENGINEER: ADDRESS:	CONTACT DETAILS:
ARCHITECT: ADDRESS:	CONTACT DETAILS:

PROJECT DETAILS

XYPEX PRODUCTS USED: (quantity Xypex Admix / cubic meters)
NON XYPEX PRODUCTS USED: (eg. Waterstops, colour oxides)
CONCRETE SUPPLIER: ADDRESS:

GUARANTEE SECTION

NUMBER OF YEARS: (refer to pre-works warranty request; copy attached)
DETAILS OF WORK PERFORMED: Full details of all work carried out including Xypex Admix areas and construction joint details. Attach a site plan with all treated areas clearly marked.

XYPEX APPLICATOR:

All Xypex applications (including approved water stop to construction joints) have been completed in accordance with the relevant Xypex Specification / manufacturer's directions; inspected for defects and tested prior to placement of other construction.

XYPEX APPLICATOR SIGN:

PRINT NAME:

DATE:

BUILDERS REPRESENTATIVE:

All Xypex works have been completed; inspected for defects and tested prior to placement of other construction.

BUILDERS REPRESENTATIVE SIGN:

PRINT NAME:

DATE:

XYPEX REPRESENTATIVE:

All Xypex works have been completed; inspected for defects and tested prior to the placement of other construction.

AUTHORISED XYPEX REPRESENTATIVE SIGN:

PRINT NAME:

DATE:

QUALITY ASSURANCE FORMS CHECK LIST:

ITEM:	CHECK <input checked="" type="checkbox"/>
MARKED UP PLAN OF XYPEX WORKS	
XYPEX FORM 003 – ONSITE CHECK LIST	
XYPEX FORM 004 – BATCHING RECORDS	
XYPEX FORM 005 – DELIVERY DETAILS	