

Concrete Pour Quality Control Report

Project Name:

Location:

Report No.:

Date:

Time of Pour:

Weather:

Concrete Details

Supplier	Truck No.	Batch Ticket No.	Mix Design	Quantity (m³)	Slump (mm)	Air Content (%)	Temp (°C)	Time Delivered	Time Placed

Placement Details

Placed By:

Element Poured:

Formwork Check:

Vibration Method:

Testing & Observation

Test Type	Sample No.	Result	Tested By	Comments
Compressive Strength (MPa)				
Slump Test				
Others				

Remarks / Observations

Prepared By

Site Supervisor

Quality Inspector

