

Fireproofing Application Quality Control Report

Project Information

Project Name		Report No.	
Location		Date	
Client/Owner		Contractor	

Fireproofing Material Information

Material Name/Type	Manufacturer	
Batch/Lot No.	Expiration Date	
Application Method		

Environmental Conditions

Date/Time	Temperature (Â°C)	
Humidity (%)	Surface Temp (Â°C)	
Weather		

Substrate Preparation

Surface Condition		
Cleaning Method	Primer Applied	
Comments		

Application Details

Location/Area	Thickness Required (mm)	Thickness Applied (mm)	Adhesion Test

Inspection & Remarks

Inspection Result	
Non-Conformance (if any)	
Corrective Action	
Remarks	

Prepared By / Inspector

Date: _____

Contractor / Applicator

Date: _____

Client / Owner

Date: _____