[CompanyName]

an Manual Contractor Quality Control (CQC) Plan

[ProjectName] [ProjectNumber]

Management acceptance

This Contractor Quality Control Plan has been reviewed and accepted.

Endorsed By: (Name / Title) [QCManagerName], QC Manager				
Signature:	[QCManag	erName]	Date	[Date]
Revision History				
Version	Date	Notes		Approved by
1.0	[Date]	Initial Issue		[QCManagerName]

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CONTRACTOR QUALITY CONTROL PLAN

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For More Information, Visit www.firsttimequalityplans.com Or Call: 410-451-8006

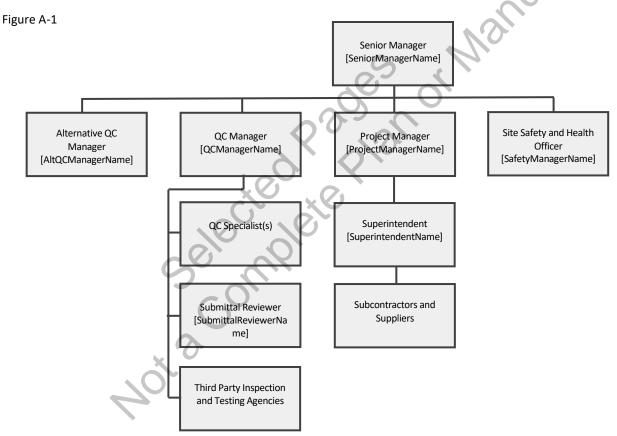
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B. ORGANIZATIONAL CHART

The Project QC Organization Chart shows the QC organizational structure. The chart includes job positions along with the name of each person appointed to that position. Figure A-1 shows the QC Organization Chart for this project.

The Senior Manager defines the organization chart for the project. The organizational chart includes job titles, names of assigned personnel, and organizational and administrative interfaces with the customer. The organization chart defines lines of authority as indicated by solid connection; dotted lines indicate lines of communication. The lines of authority preserve independence of quality control personnel from the pressures of production.



C. NAMES AND QUALIFICATIONS

Job qualifications for each person appointed to key project job positions are documented by their resumes and CQM Certificates when required.

Personnel qualifications in resume format (including position titles and durations for qualifying experiences) for each person in the QC organization are included as exhibits in this subsection.

Table C-1 lists the positions and persons appointed for all key project job positions.

Table C-1

Job Position	Name
QC Manager	[QCManagerName]
Alternate QC Manager	[AltQCManagerName]
Superintendent	[SuperintendentName]
Project Manager	[ProjectManagerName]
QC Specialist (one for each of the areas at the worksite)	[QCSpecialistName]
Submittal Reviewer (one or more, must be qualified in discipline being reviewed)	[SubmittalReviewerName]
Site Safety and Health Officer	[SafetyManagerName]
40t a	

F. APPOINTMENT LETTERS

Appointment letters are signed by the Senior Manager appointing the QC Manager and Alternate QC Manager and state that they are responsible for implementing and managing the QC program as described in this Contract. Included in these letters is the responsibility of the QC Manager and Alternate QC Manager to implement and manage the three phases of control, and their authority to stop work that is not in compliance with the Contract.

Letters of direction are issued by the QC Manager to all other QC Specialists or quality control representatives outlining their duties, authorities, and responsibilities.

The project-specific Letters of Appointment and Letters of Direction are included as exhibits in this subsection.

ected Padean of a second eter Key project personnel have accepted their appointments and declared their ability to carry out the appointments as indicated by their signature.

[CompanyName]				
QC Manager Appointment Letter				

Project ID	[ProjectNumber]
Project Name	[ProjectName]
Appointed QC Manager	[QCManagerName]

Please be advised that you are hereby appointed as QC Manager for the above-referenced project. Your responsibilities include managing and implementing the [CompanyName] QC Program and the Construction Quality Control (QC) Plan regarding the referenced project.

I assign you responsible for:

- Implementing and managing the QC program
- Serving as the Site Safety and Health Officer (SSHO) if applicable
- Attending the partnering meetings, QC Plan Meetings, Coordination and Mutual Understanding Meeting,
- Conducting the QC meetings
- Performing the three phases of control
- Performing submittal review and approval
- Ensuring testing is performed
- Provide QC certifications and documentation required in this Contract
- Managing and coordinating the three phases of control and documentation performed by the QC Specialists, testing laboratory personnel and any other inspection and testing personnel required by this Contract.
- Managing all QC activities
- Notifying the Special Inspector of activities which require their review.
- Coordinating the Special Inspection 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.

Senior Manager signature and date:

[SeniorManagerName] / [Date]

COMPETENT PERSON STATEMENT

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

QC Manager signature and date:

[QCManagerName] / [Date]

[CompanyName] QC Specialist Letter of Direction			
Project ID	[ProjectNumber]		
Project Name	[ProjectName]		
Appointed QC Specialist	[QCSpecialistName]		
Please be advised that you are hereby appointed as QC Specialist for the above-referenced project. All First Time Quality Samples are Copyright Protected rree phases of control ir area of responsibility. 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.			
QC Manager signature and date: [QCManagerName] / [Date]			
COMPETENT PERSON STATEMENT I am the designated QC Specialist capab QC Specialist signature and date: [QCSpecialistName] / [Date]	ole and competent to carry out the responsibilities and authority as stated above.		

M. LIST OF DEFINABLE FEATURES

Each feature of work is subject to the three phases of control and completion inspection described in the next subsection.

A listing of project features of work is included on the Quality Control Feature of Work List is included as an exhibit in this subsection.

The QC Manager identifies each phase of design and construction feature of work that requires separate quality controls. Each feature of work triggers a set of requirements for quality control inspections before, during and after features of work.

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[CompanyName] Quality Controlled Feature of Work List				
Project ID	Project Name	Preparer	Date	
[ProjectNumber]	[ProjectName]			
Project Features of Work / Contract Section	Quality Controlled	feature of work	Method for identification of Approved Inspection Status	
		S S		
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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

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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						
Р	Project ID Project Name			Punch List Type			
[ProjectNu	imber]	[ProjectName]	Features	of Work			
Inspection Date		Preparer	Project Final Punch		-		
					Item Completion Verification		
Item	Location	Description	Due Date	Compl. Date	Super Initial	QA Initial	
			S				
			6	0			
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	2				
			NO.				
		S					
Punch List Completion Date Final QA Sign-off		Remaining Deficiencies Reported ID # and Description					



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