

	OTHER QA FORMS SCHE	DULE
REF NO.	DESCRIPTION	COMMENT
QAF-101	QA PROCEDURE TRAINING REGISTER	
QAF-102	SAMPLE REGISTER	
QAF-103	SITE MATERIAL REQUISITION & TRACKING FORM	
QAF-104	RETURN OF GOODS/CREDIT REQUEST	
QAF-105	DEWPOINT AIR TOOL LIST	
QAF-106	TOOL ISSUE FORM	
QAF-107	DRAWING REGISTER	
QAF-108	DUCT MANUFACTURE PROGRAMME	
QAF-109	LABOUR PROGRAMME	INCLUDES DRAFTING & DUCT
		INSTALL
QAF-110	LABOUR HOURS REPORTING	
QAF-111	CONSTRUCTION TRACKING SCHEDULE	
QAF-112	PROCUREMENT SCHEDULE	
QAF-113	REQUEST FOR INFORMATION REGISTER	
QAF-114	REQUEST FOR INFORMATION	VIA EMAIL
QAF-115	NOTICES	VIA EMAIL



FORM NO: QAF-101	QA PROCEDURE TRAINING	REGISTER			
COURSE TRAINER & LOCATION	N (IF APPLICABLE):				
QUALITY ASSURANCE PROCEDURE	EMPLOYEE/ SUBCONTRACTOR NAME	TRADE AND/OR COMPANY	DATE COMPLETED	SIGNATURE	HRS (IF APPLIC)
PROCEDURE	SUBCONTRACTOR NAIVIE	AND/OR COMPANY	CONFLETED	SIGNATURE	APPLIC



FORM NO:	QAF-102 SAMPLE REGIST	ER				
ITEM REF NO:	DESCRIPTION	SUPPLIER	DATE SUBMITTED	DATE ACCEPTED	STORAGE LOCATION	COMMENTS



SUPPLIER:	FORM NO	: Q	AF-10	3 SITE MATER	IAL REQUISITION 8	R TRACKING F	ORM
REQUEST/ DATE: MATERIAL / DESCRIPTION COST. ACCUMULATIVE	SUPPLIER:				ORDER NUMBER:		
	SITE CONT	ACT:			CONTACT PH:		
		DA ⁻	TE:	MATERIAL / DE	SCRIPTION	COST:	



FORM NO:	QA	F-104	R	RETURN OF	GOOD	OS/CREDIT RI	EQUEST
SUPPLIER:							
CONTACT NA	AME:				CONT	ГАСТ РН:	
EMAIL ADDR	RESS:				DATE	EMAILED:	
					·		I
DEWPOINT CONTACT NA	AME:				NUM	IL/PHONE BER:	
ORDER NUMBER		OICE MBER	INVOIC		UNT	CREDIT VALUE PENDING (EXC GST)	REASON CREDIT SOUGHT



FORM NO:	QAF-	105	DEWPO	INT AIR TO	OL LIST						
LAST UPDATED:				UPDATED B	BY:			NOTE:	TEST & T	AG DUE EVER	Y 3 MTHS
TOOL	QTY	MAKE	MODEL	S/N OR ID	SUPPLIER	PURCHASE DATE	INVOICE # & WARRANTY DETAILS	CURRENT LOCATION	RETURN DATE EXPECTED	CONDITION AT LAST INSPECTION (POOR/GOOD ETC)	COMMENT

PROJECT NUMBER: PROJECT TITLE:



FORM NO:	QAF-106	TOOL ISSUE FORM

BY SIGNING THE BELOW FORM, THE EMPLOYEE/SUBCONTRACTOR ACKNOWLEDGES:

- Acceptance of the listed items into the employee/subcontractor's custody, care and control during the allocation period.
- Whilst in the employee/subcontractor's custody, the items are used, maintained and stored in a professional and safe manner.
- Any damage to the items will be immediately reported to the applicable Dewpoint representative (eg. Site Supervisor).
- That these items are the property of Dewpoint Air and the items will to be used solely for Dewpoint Air works.
- That the items will be returned to Dewpoint Air when requested, and in the same good working condition as when the items were allocated.

COMPANY:			EMPLOYEE NAME:			ACCEPTANCE SIGNATURE:			
IDENTIFYING NUMBER	ITEM DESCRIPTION	BRAND	SERIAL NUMBER	ACCESSORIES	SITE NAME	LAST TEST/TAG	NEXT DUE TEST/TAG	DATE OUT	DATE IN
DEWPOINT AI	R REPRESENTATIVE NAME:				DEWPOINT REP SIGNA	TURE:			

COMPANY:			EMPLOYEE NAME:			ACCEPTANCE SIGNATURE:			
IDENTIFYING NUMBER	ITEM DESCRIPTION	BRAND	SERIAL NUMBER	ACCESSORIES	SITE NAME	LAST TEST/TAG	NEXT DUE TEST/TAG	DATE OUT	DATE IN
DEWPOINT AI	R REPRESENTATIVE NAME:	ATIVE NAME:			DEWPOINT REP SIGNAT	JRE:			



FORM NO:	QAF-107	' D	RAWII	NG REC	SIS	TEI	R																											
Dewpoint Air			PROJECT:					BUILDER	ì:						JO	OB NO:					ISSUED	DATE					- /							T
18 Blandford Stre	ot		711032211					oontoe.																		٦.			45		ÍI A			+-
																										-[[]	Ш	'				16		
Grange QLD 4051																										-	-	_	-)-		^			
																							- 1			de	sign l	insta	l I ma	intain	А	IK.		
Tal. (07) 2252 444	16																														1			+
Tel: (07) 3352 444	10																																	
MECHANICAL DRAWING R	GISTED			Day																		_							_	\rightarrow	_	+	+	+-
& TRANSMITTAL - DRAWIN				Month																												十		+-
				Year																												土		
																			_	ISSUED														
	DRAWING TITLE		NUMBER	Latest Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev	Rev F	Rev Re	ev Rev	v Rev
					ļ					ļ																								
					ļ					ļ																			0-1					
					l																						\ \	\sim		······				
																										\			//					
					ļ					ļ																\	\rightarrow		>					
					ļ																						\							
																								t∨				·····						
																								χ	ζ									
					ļ					ļ							ļ							///	<u></u>	\		ļ						
					ļ					ļ											9	\supset	\leftarrow			/								
							Н												Н			$\overline{}$	1	//	\rightarrow							+		-
DISTRIBUTION & RETRIEVAL MONITOR					Numb	oer Of	Prints	Issued	or Re	trieved	-											7	$\overline{\prime}$	\diamond								-		\neg
Builder																							abla abl	,								\top		
Consultant																				۸)											
INSULATION Architect					ļ	ļ														f(9-1	\sim												
Production					ļ	ļ														/-/-	\sim	l												
Site																		\sim		/,	1									······				<i></i>
Commissioning																			1 /	>	\sim	>												
Internal																	$(\circ$	7																
Drafting					ļ	ļ									/		\sim	//																
Pipework Contractor Electrical Contractor	_			-		ļ									~~~		1/	\sim																
Fire Services Contr.																·/)	·}																	
Electronic Copy (CD)																	<i></i>									••••••			···········	·······			·····	
FACTORY																\sim																		$\overline{}$
REASON FOR ISSUE / RETRIEVAL			Sender																															\top
P - Preliminary	S - Superseded				$ldsymbol{le}}}}}}}}$								Ш																			丄		丄
A - Approval (LETTERS)	X - Information																															\bot		
T - Tender	U - Updated Revision	rene	Reason		l	l .																								_		+	_	
C - Construction (NUMBERS)	O - Original (Sepia)PF - PLOT	FILE			ı	ı				ı	ı							ı	ı								l .							—
			_																															

PROJECT NUMBER: PROJECT TITLE:



FORM NO: QAF-108 DUCT MANUFACTURE PROGRAMME DUCT MANUFACTURE PROGRAM REVISION NO 1 DATE: APPROVAL DRAWING CONSTRUCTION DRAWING MANUFACTURE START DATE DUCT REQUIRED **END DATE DUCT ON SITE** LEVELS DRAWING NO REV PENETRATION DRAWING REQUIRED REQUIRED **DATE/SCHEDULES DAMPERS** ON SITE REQUIRED 1 WEEK DRIFT Level 1 1 WEEK DRIFT Level 2 1 WEEK DRIFT Level 3 1 WEEK DRIFT Level 4 1 WEEK DRIFT Level 5 1 WEEK DRIFT Level 6 1 WEEK DRIFT Level 7 1 WEEK DRIFT Level 8 1 WEEK DRIFT Level 9 1 WEEK DRIFT Level 10 1 WEEK DRIFT Level 11



FORM NO: QAF-109					LA	ВС	U	R F	PRO	OG	R/	M	M	Ε																														
WEEK START DATE:																																							T					
			WE						EEK						EK					WE						NEE					NEE					WE					WE			
BLDG/FLOOR/AREA/LOCATION:	М	Т	W	Т	F S	S I	M T	· V	V T	F	S	М	T	W	Т	F	S	М	Т	W	Т	F	S	М	Т	w ·	ΓF	S	M	Т	W	T	F S	N	1 T	W	Т	F S	1 2	M T	W	/ T	F	S
																																_												
					_	_	_	_	1																_			1		_	_		_	-	<u> </u>	\sqcup	_		\perp	_	<u> </u>			
					_	_			1												_				_			1		_	_	_		1	1		_				1			
									-																_					_														
						-	_	_																				-				_												
																																												_
																																												_
						_	-		-																_	_		-		_				-										
						_	_	_	-														_		_		-	_				_	_						-					
							_																		_			-				_		-										
							_																		_			-				_		-										
							_																		_			-				_		-										
						+	-	-	-														_		_		-	-				-	-	-										_
						+	-	-	-														_		_		-	-				-	-	-										_
						-	-	-	-																-			-		-	-	-		-					-					_
						-	-	-	-																-			-		-	-	-		-					-					_
					-	+		-	1			\vdash							\vdash		-	-	4			-	-	1	\vdash	\dashv	-	+		+	-	\vdash	-		-	-	-			_
		\vdash	_			\perp	-		+											_	\dashv					-	-	+	\vdash	+	-	-		+	\vdash	\vdash	-	-	-	-	-		H	_
		\vdash	_			\perp	-		+											_	\dashv					-	-	+	\vdash	+	-	-		+	\vdash	\vdash	-	-	-	-	-		H	_
	\vdash	\vdash		+	+	+	+	+	+	\vdash							<u> </u>				\dashv	\dashv	-	+	\dashv	+	-	+	\vdash	\dashv	+	+	+	+	-	\vdash	\dashv	+	+	+	-		\vdash	_
		\vdash	_			\perp	-		+											_	\dashv					-	-	+	\vdash	+	-	-		+	\vdash	\vdash	-	-	-	-	-		H	_
				-	+	+	-	-	+												\dashv	\dashv	+	+	+	+		+	\vdash	\dashv	+	+	-	+	1	$\vdash \vdash$	-	+	-	-	-			
						+		-	1			\vdash							\vdash		+	-	-		-			+	\vdash	-	-	-		+		\vdash	-			-	-			_
	1			+	+	+	+	+	1	\vdash		\vdash							H		\dashv	\dashv	+	+	\dashv	+	+	1	\vdash	\dashv	+	+	+	1	1	$\vdash \vdash$	\dashv	+	+	-	1			_
			_		-	+	-	-	+											_	\dashv	-	\dashv	-	-	-		+	\vdash	\dashv		+	-	+	1	\vdash	-	-	-	-	-			
				+	+	-	-	-	1												+	\dashv	+	+	\dashv	+	-	+	\vdash	+	+	+	-	+	1	\vdash	\dashv	+	+		1			_
	1								<u> </u>							<u> </u>	1								I_	_			Ш					<u> </u>	<u> </u>	<u> </u>					<u> </u>	<u> </u>		_



FORM	NO: QAF	-110		LABOUR	HOURS	REPOR	RTING									
				NO OF						INJUF	RY ANALYSI	S / BREAK D	OWN			
MONTH	SUBCONTRACTOR	T.E	T.L.H	NEAR MISSES	NO OF M.T.I'S	NO OF L.T.I'S	MINOR CUT	SPRAIN/ STRAIN	FOREIGN BODY	CRUSH	MAJOR OPEN WOUND	FRACTUR E /BREAK	BURNS	ELECTRIC SHOCK	CONCUSSI ON	OTHER (LIST)
T.E – TOT.	AL EMPLOYEES			s that worke onth recorde		M.T.I – N	MEDICAL TF	REATMENT	NJURIES	subsequ		resume th	e full scope	e of their jol	dical treatm b without lo	
T.L.H – TO HOURS	OTAL LABOUR		l hours wor month rec	ked on the լ orded.	oroject	L.T.I – LO	OST TIME IN	IJURY		An injury	that result	s in continu	ous lost tin	ne that exce	eeds the day anent injury	



FORM NO: QAF-111 CONSTRUCTION TRACKING SCHEDULE										
			REV O					STATUS AS AT:		
DUCT DELIVERY AND FLOOR ACCESS								SUPPLIER	COMMENTS	
ITEMS										
LEVELS										
ESTIMATED DELIVERY DATES										
ESTIMATED DELIVERY DATES										
FOTHER DELIVERY D										
ESTIMATED DELIVERY DATES										
ESTIMATED DELIVERY DATES										
ESTIMATED DELIVERY DATES										
ESTIMATED DELIVERY DATES										
ESTIMATED DELIVERY DATES										



FORM NO:	QAF-112		PRO	OCUREMENT S	CHEDULE						
PROJECT MANAGER:			-			ISSUE:					
SITE SUPERVISOR:						PREPARED BY:					
PROJECT ENGINEER:						DATE:					
ORDER PRIORITY	EQUIPMENT	SUPP	LIER	SUPPLIER CONTACT	PURCHASE ORDER DATE	PURCHASE ORDER NO.	PURCHASE ORDER VALUE		VERY EKS	SITE DUE DATE	ACTUAL DELIVERY DATE



FORM NO:	QAF-113	REQUEST FOR INFO	REQUEST FOR INFORMATION (RFI) REGISTER							
RFI NO	DATE	SUBJECT	AUTHOR	RESPONSE RECEIVED	REF # /					