

# SPECIALIZED TESTING



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## TEST SPECIMEN AND COMPRESSIVE STRENGTH DATA SHEET

PROJECT NAME: \_\_\_\_\_ INSPECTION FIRM OR CLIENT: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ INSPECTOR'S NAME: \_\_\_\_\_

\_\_\_\_\_ INSPECTOR'S LICENSE NO.: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_ FIELD IDENTIFICATION: \_\_\_\_\_

### CAST DATA (PERFORMED BY OTHERS AND NOT VERIFIED BY LAB)

| CAST DATE        | DESCRIPTION  | Concrete | Grout | Mortar | Shotcrete | Masonry Prism           | Other _____ |
|------------------|--|----------|-------|--------|-----------|-------------------------|-------------|
| CONTRACTOR       | SPECIFIED F'c - PSI  |          |       |        |           | CEMENT TYPE             |             |
| CONC. SUPPLIER   | CAST BY  |          |       |        |           | ADMIXTURE               |             |
| PLANT            | NO. OF SAMPLES   |          |       |        |           | SLUMP (C143)            |             |
| MIX DESIGN NO.   | TOTAL YARDS  |          |       |        |           | AIR (C173)<br>(C231)    |             |
| TICKET NUMBER    | CAST / MIX TIME  |          |       |        |           | AIR/CONC<br>TEMP(C1064) |             |
| LOCATION OF POUR |  |          |       |        |           |                         |             |
| NOTES            |  |          |       |        |           |                         |             |
| BILL TO          |  |          |       |        |           |                         |             |
| TEST SCHEDULE    | _____ at 7-Days, _____ at 28-Days, _____ at _____ -Days, _____ at _____ -Days, Other _____ |          |       |        |           |                         |             |

### FOR LABORATORY USE ONLY - LABORATORY COMPRESSIVE STRENGTH DATA

|                       |  |                      |  |
|-----------------------|--|----------------------|--|
| DATE SPECIMENS RECVD. |  | EQUIPMENT USED       |  |
| REPORT DATE           |  | SN OF EQUIPMENT      |  |
| TECHNICIAN            |  | CALIB. / RECAL. DATE |  |

| SPECIMEN IDENTIFICATION NUMBER | AGE AT TEST (DAYS) | DATE OF TEST | TIME OF TEST | SPECIMEN DIMENSIONS-IN. <sup>1</sup> |       |       |       | AREA SQ. IN. | LOAD LBS. | F'c PSI | BREAK TYPE <sup>2</sup> |
|--------------------------------|--------------------|--------------|--------------|--------------------------------------|-------|-------|-------|--------------|-----------|---------|-------------------------|
|                                |                    |              |              | 1 IN.                                | 2 IN. | 3 IN. | 4 IN. |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |
|                                |                    |              |              |                                      |       |       |       |              |           |         |                         |

<sup>1</sup>Dimensions 1 and 2 = Diameters; Dimensions 3 and 4 = Height; NA if Cylinder 2.2 > l/d > 1.8

<sup>2</sup>Break Type Designation Per ASTM C39 Figure 2: 1 = Cone, 2 = Cone and Crack, 3 = Columnar, 4 = Diagonal, 5 = Side Fracture, 6 = Side Fracture Point