| Contractor | | Contractor Name | | | | | | | | | | | | | | REPORT NO. | |
|-----------------------------------|-------------------------|-----------------|---------|-----------|---------------|---------|-------------|----------|---------|--------|-----------|------------------------|-----|---------------------------|--------|------------|----|
| Contractor Logo | | | | | | | | | | | | | | | DATE: | | |
| | PROJECT NAME | | | | | | | | | | | | | | PAGE : | (| OF |
| | | | | MA | | | DIS ERIA | _ | | | | POR7 | Γ | | | | |
| PROJECT NO. | ROJECT NO. 846 MRR NO.: | | | | SHIP ADV. NO. | | | | | | UNIT | | | COUNT CLASS ROGRESSIVE | | | |
| | | | | | | | | | | | | | | | | | |
| MATERIAL DES | CRIPTIO | ON T | | D.D.G.GD. | | | | | | | | | | | | | |
| ITEM | | | | DESCR | IPTION | | | | | | | | QU | ANTITY | | | |
| SUPPLIER / MFR | | | | | | | | | | | MR No. | | | | PO No. | | |
| SUPPLIER / MFR | . : | | | | | | | | | 1 | VIIX INU. | | | | 10 No. | | |
| THE FOLLOWI | NG DEI | CICIEN | CIES W | ERE N | OTED I | BY INSI | PECTIO | N | | | | | | | | | |
| 1. POOR WORK | | | | | | | | | -UP) (S | SCARS) | (DIRT | (Y) | | | | | |
| (POOR) | | (PA | INT) | | (OTF | HER) | | (DESC | RIBE) | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| 2. FAULTY ASSI | EMBLY | (DESCI | RIBE) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| 3. OTHER (DESC | CRIBE) | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| 4. REMARKS | | | | | | | | | | | | | | | | | |
| 4. REMARKS | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| THESE DISCRE | PANCI | ES ARE | (MAJC | OR) (MI | NOR) A | ND RE | WORK | (IS) (IS | NOT) | REQUI | RED | | | | | | |
| ITEM HAS BEE | N TAGO | GED (H | OLD) (l | REJECT | TED) | | | | | | | | | | | | |
| IF NECESSARY PHOTOGRAPHS TO BE AT | | | | | ГАСНЕ | D | | | | YES | | | | NO | | | |
| REQUIRED ACT | TIONS: | | | | | | | | | | | | | | | | |
| MUST REPAIR | BE MAI | DE IMM | 1EDIA | TELY T | O MAII | NTAIN | CONST | RUCTI | ON SCI | HEDUL | Е? | | YES | | NO | | |
| IF REPAIR NOT | URGE | NT MU | ST BE | COMPL | ETED : | BY WH | AT DAT | TE? | | | | | | | | | |
| IS THERE A PO | TENTL | AL BAC | СКСНА | RGE ? | | | | YES | | | то | | | | NO | | |
| PREPARED BY: | | | | | CHECKED BY: | | | | | | | APPROVED BY: | | | | | |
| Contractor OC ENGINEER | | | | | Company | | | | | | | Third Part (if require | | required | 1) | | |
| NAME | | | | | NAM | 1E | | | | | | NAME | | | | | |
| DATE | | | | | DAT | Е | | | | | | DATE | | | | | |
| SIGN | | | | | SIGN | 1 | | | | | | SIGN | | | | | |
| FM-QMP-004 | 2 Ray | Δ | | | | | | | | | | | | | | | |
| I WE WIT TOUA | <u>د,۱۱۵۷</u> | | | I A | L ttachn | nent # | 7.4 to | PP fc | r Field | d Mate | rial C | ontrol | | | | | |