

**Instructions:** The form must be completed by the City of Houston approved Special Inspection Agency.

Fabricator's Name: _____ Fabricator's number: _____ Date: _____		
Plant Address: _____		
Fabricator's Representative Name: _____		Title: _____
Fabricator's Representative E-Mail Address: _____		
Phone Number: _____		
<b>SPECIAL INSPECTION AGENCY:</b> _____		
Agency's Number: _____	Time In: _____	Time Out: _____
Inspector Name: _____	Phone Number: _____	
E-Mail Address: _____		
<b>COMMENTS PERTAINING THIS AUDIT</b>		
_____ _____ _____ _____ _____		
<b>INSPECTOR RECOMMENDATIONS</b>		
<input type="checkbox"/> NEW CERTIFICATION AS CERTIFIED FABRICATOR OF _____		
<input type="checkbox"/> RENEWAL OF CERTIFICATION		
<input type="checkbox"/> APPROVED UPON CORRECTION OF FINDINGS		
<input type="checkbox"/> DISAPPROVAL		
<b>SPECIAL INSPECTOR SIGNATURE:</b> _____		<b>DATE:</b> _____
<b>COMPLETE, SIGN, SEAL &amp; DATE THIS FORM AND MAIL OR EMAIL TO THE CITY OF HOUSTON:</b> Building Code Enforcement – Code Development, 1002 Washington Ave., Houston, Texas 77002 Email: <a href="mailto:code.development@houstontx.gov">code.development@houstontx.gov</a>		

◆ *Symbol intended for office use only*

## AUDIT OF FABRICATION PRACTICES (STEEL)

Fabricator's Name: \_\_\_\_\_ Fabricator's number: \_\_\_\_\_ Date: \_\_\_\_\_

A	GENERAL REQUIREMENTS	COMPLIANCE	COMMENTS
A-1	Is the Quality Control Manual fully documented and up to date?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
A-2	Is the Quality Control Manual reviewed at least annually? Provide last review date: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO	
A-3	Are there any revisions to the Quality Control Manual? Provide the latest revision date: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO	
A-4	Are there any key personnel changes since the last inspection?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
A-5	Are the annual inspections performed as required? Provide last inspection date: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B	ENGINEERING	COMPLIANCE	COMMENTS
B-1	The fabricator can demonstrate that there is either an in-house or an outside licensed engineer to perform necessary designs and/or to consult on technical questions.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-2	The fabricator can demonstrate that there is an in-house or outside special process consultant for each special process performed (such as: welding, bolting, etc.).	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-3	The contract documents are reviewed to ensure that all materials and processes are specified or indicated in the drawings or specifications.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-4	The fabricator reviews the contract documents and structural/architectural drawings for correctness.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-5	The fabricator has a process to review corrections and complex design problems encountered in the fabrication process.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-6	The fabricator has personnel with adequate knowledge to provide answers to technical questions.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-7	The fabricator has personnel with adequate knowledge of applicable material specifications.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
B-8	The fabricator has personnel with knowledge of mill roll practices. <sup>2</sup>	<input type="checkbox"/> YES <input type="checkbox"/> NO	
C	DRAFTING	COMPLIANCE	COMMENTS
C-1	Shop drawings are properly prepared.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
C-2	The fabricator has personnel capable of supervising, evaluating, and coordinating shop drawing preparation and all shop drawings are reviewed for correctness.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
C-3	The fabricator has an in-house capability of providing special details for the shop/plant to solve fabrication problems.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
C-4	The shop drawings indicate materials to be utilized in the final structure.	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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Fabricator's Name: \_\_\_\_\_ Fabricator's number: \_\_\_\_\_ Date: \_\_\_\_\_

D	DRAWING CONTROL	COMPLIANCE	COMMENTS
D-1	The fabricator can verify control of design drawings as follows: <input type="checkbox"/> receipt <input type="checkbox"/> on file <input type="checkbox"/> revisions	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-2	The fabricator can verify control of specifications and addendums.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-3	The fabricator can demonstrate control of shop drawings: <input type="checkbox"/> receipt <input type="checkbox"/> on file	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-4	The Quality Control Manual traces each phase from drawing preparation, to shop drawing, receipt, submittals for approval, approval, resubmittals and date sent to shop/plant for fabrication.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-5	The fabricator can demonstrate control of revisions to shop drawings.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-6	The fabricator can demonstrate control of obsolete shop drawings.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
D-7	The drawing control system used is the one described in the Quality Control Manual.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
E	WORK ORDER – JOB CONTROL	COMPLIANCE	COMMENTS
E-1	The fabricator has established a job control number/identification system for all work accepted.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
E-2	All correspondence received is marked with its job identification mark.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
E-3	Job correspondence is filed with the job files for that work.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
E-4	All correspondence received is: <input type="checkbox"/> stamped received <input type="checkbox"/> dated & initialed	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F	MATERIAL PROCUREMENT	COMPLIANCE	COMMENTS
F-1	Materials are procured by a purchase order or some other type of form that provides verification and documentation of the order.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-2	All materials are ordered or procured to acceptable standards and/or specifications.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-3	The material specifications are indicated/documentated on the purchase order/form used for materials procurement.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-4	The procurement document states how the material shall be marked/identified.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-5	The fabricator requires suppliers to furnish material certification reports on the procurement document.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-6	The procurement documents specify that material test reports shall accompany material/subassembly delivery to the fabricator's facility.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
F-7	The fabricator has documented the review of the quality status of suppliers on a regular basis.	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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F-8	The QA/QC manager has visited and/or reviewed subcontractors' fabrication and/or Quality Control System operations on a random basis where applicable.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>G</b>	<b>RECEIVING MATERIAL</b>	<b>COMPLIANCE</b>	<b>COMMENTS</b>
G-1	The fabricator is using a formal method for receiving materials/subassemblies.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-2	The fabricator inspects all incoming materials arriving at the facility.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-3	The fabricator has a material identification system to assure control of materials of different grades/sizes (as applicable).	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-4	Acceptance tolerances are available at the receiving inspection station.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-5	Receiving inspections are documented.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-6	The receiving inspector understands the company system for: <ul style="list-style-type: none"> <li><input type="checkbox"/> receiving materials</li> <li><input type="checkbox"/> receiving subassemblies</li> <li><input type="checkbox"/> acceptance/rejection of nonconforming materials and/or subassemblies</li> <li><input type="checkbox"/> means of handling correctable nonconformities observed during the receiving inspection</li> </ul>	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-7	The material identification process utilized provides material traceability to the final product.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
G-8	Receiving inspector confirms: <ul style="list-style-type: none"> <li><input type="checkbox"/> quantity of materials</li> <li><input type="checkbox"/> grade of material</li> <li><input type="checkbox"/> size of material</li> <li><input type="checkbox"/> length of material</li> <li><input type="checkbox"/> heat numbers or material match heat numbers on mill certificates</li> <li><input type="checkbox"/> acceptance tolerances</li> </ul>	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>H</b>	<b>HANDLING &amp; STORAGE EQUIPMENT, FACILITIES AND PROCEDURES</b>	<b>COMPLIANCE</b>	<b>COMMENTS</b>
H-1	The fabricator has adequate facilities, equipment and illustrated drawings or instructions available to indicate the proper way to: <ul style="list-style-type: none"> <li><input type="checkbox"/> handle materials in the yard <sup>2</sup></li> <li><input type="checkbox"/> handle materials in the plant</li> <li><input type="checkbox"/> store materials/subassemblies</li> <li><input type="checkbox"/> provide correct bracing/blocking for materials/subassemblies <sub>2</sub></li> <li><input type="checkbox"/> prevent material/subassembly deterioration</li> <li><input type="checkbox"/> provide correct storage for fabricated products</li> <li><input type="checkbox"/> handle fabricated products</li> </ul>	<input type="checkbox"/> YES <input type="checkbox"/> NO	
H-2	The fabricator is utilizing an adequate control process for stocked/stored materials.	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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Fabricator's Name: \_\_\_\_\_ Fabricator's number: \_\_\_\_\_ Date: \_\_\_\_\_

I	NORMAL AND SPECIAL PROCESSES CONTROL	COMPLIANCE	COMMENTS
I-1	The fabricator controls normal and special production/work processes.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-2	Acceptance standards are readily available or posted near workstations for review by production personnel and inspection personnel.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-3	Sufficient work instructions are available to production personnel at each workstation.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-4	Fabricator utilizes established qualification standards for special work processes (such as welding, strand tensioning, laminating and so on).	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-5	Qualifications for personnel performing special work processes are available or posted and maintained up-to-date, readily available to production supervisors and quality control personnel.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-6	Special process personnel have been assigned identification symbols to identify work performed by them.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-7	The assigned identification symbols for special process personnel are readily available or have been posted for use by Quality Control inspectors.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-8	Special process personnel identify work they performed.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-9	Key inspections by production personnel are documented.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-10	All inspections are documented.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-11	The fabricator can demonstrate the system utilized for: <input type="checkbox"/> minor repairs <input type="checkbox"/> major repairs <input type="checkbox"/> documentation of re-inspection of repairs	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-12	The fabricator can demonstrate a system for rejection and disposal of non-repairable nonconformities.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-13	The fabricator can demonstrate that surveillance of stored fabricated products is performed on a routine scheduled basis.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
I-14	Fabricated products are stored on a hard compacted well drained surface.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
J	EQUIPMENT CONTROL & MAINTENANCE	COMPLIANCE	COMMENTS
J-1	The fabricator can demonstrate that each piece of equipment in the plant: <input type="checkbox"/> is acceptable or not acceptable for use <input type="checkbox"/> is documented on the equipment <input type="checkbox"/> is on a maintenance program <input type="checkbox"/> is listed on a maintenance log <input type="checkbox"/> has been calibrated within an acceptable established time frame where applicable <input type="checkbox"/> is listed, when appropriate, in a calibration log when actively	<input type="checkbox"/> YES <input type="checkbox"/> NO	

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K	AUDITS/REVIEWS OF THE QUALITY PROGRAM	COMPLIANCE	COMMENTS								
K-1	Verification was presented to demonstrate that management has reviewed the Quality Control System within the last twelve (12) months.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
K-2	Management has taken steps to measure the effectiveness of the quality program.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
K-3	The QA/QC manager has shown documentation that each Quality Control Manual was reviewed to ensure it is complete and up to date within the last six (6) months.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
K-4	The fabricator has established a record retention system and is retaining job records for a minimum of two (2) years after construction completion.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L	QUALITY CONTROL PERSONNEL/INSPECTORS	COMPLIANCE	COMMENTS								
L-1	Quality control inspectors were available in the plant at the time of this inspection, excluding the QC manager (applicable when appropriate).	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-2	The quality control personnel have immediate access to the specifications, addendums to specifications, or to the engineer for answering key questions.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-3	The quality control personnel have immediate access to the technical library and other pertinent information.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-4	The quality control personnel inform line production supervisory personnel when nonconforming work is observed.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-5	The quality control personnel are conversant with qualifications of special process requirements.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-6	The quality control personnel have immediate access to approved procedures for special processes.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-7	The quality control personnel are conversant with qualifications of special process personnel.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-8	The quality control personnel verify equipment is checked for acceptable performance.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-9	The quality control personnel verify that production equipment is calibrated.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-10	The quality control personnel can verify documentation of equipment maintenance and repairs.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-11	Non-conforming tools and equipment are red tagged to prevent their use in production.	<input type="checkbox"/> YES <input type="checkbox"/> NO									
L-12	The quality control personnel are equipped to properly perform assigned tasks. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> tapeline</td> <td style="width: 50%;"><input type="checkbox"/> chipping hammer</td> </tr> <tr> <td><input type="checkbox"/> calipers</td> <td><input type="checkbox"/> magnifying glass</td> </tr> <tr> <td><input type="checkbox"/> tag system</td> <td><input type="checkbox"/> amp tongs</td> </tr> <tr> <td><input type="checkbox"/> welding gage</td> <td><input type="checkbox"/> paint gauge</td> </tr> </table>	<input type="checkbox"/> tapeline	<input type="checkbox"/> chipping hammer	<input type="checkbox"/> calipers	<input type="checkbox"/> magnifying glass	<input type="checkbox"/> tag system	<input type="checkbox"/> amp tongs	<input type="checkbox"/> welding gage	<input type="checkbox"/> paint gauge	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> tapeline	<input type="checkbox"/> chipping hammer										
<input type="checkbox"/> calipers	<input type="checkbox"/> magnifying glass										
<input type="checkbox"/> tag system	<input type="checkbox"/> amp tongs										
<input type="checkbox"/> welding gage	<input type="checkbox"/> paint gauge										

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Fabricator's Name: \_\_\_\_\_ Fabricator's number: \_\_\_\_\_ Date: \_\_\_\_\_

L-13	The quality control personnel understand their responsibility to management.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
L-14	The quality control personnel have sufficient authority to perform their assignments.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>M</b>	<b>ADDITIONAL COMMENTS</b>	<b>COMPLIANCE</b>	<b>COMMENTS</b>
It is evident by this inspection and the review of the Quality Control System and its operation that currently:			
M-1	All employees are aware of the Quality Control System.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-2	Employees are familiar with the Quality Control System as it may pertain to them.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-3	Management has taken an active role in the Quality Control System.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-4	The following key functions are performed by personnel fully aware of and acquainted with the Quality Control System: <input type="checkbox"/> sales <input type="checkbox"/> purchasing <input type="checkbox"/> other _____ <input type="checkbox"/> engineering <input type="checkbox"/> production                      _____ <input type="checkbox"/> drafting <input type="checkbox"/> quality control	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-5	The fabricator has completely separated production and QA/QC activities.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-6	The fabricator QA/QC program is functioning in each of the key areas without significant omissions, inconsistencies and/or non-compliance with the established program.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-7	The fabricator appears to have sufficient procedure/work instructions to ensure all products are fabricated to conform to the contract documents and code requirements.	<input type="checkbox"/> YES <input type="checkbox"/> NO	
M-8	The fabricator has an adequately documented Quality Assurance Program.	<input type="checkbox"/> YES <input type="checkbox"/> NO	

### Does the fabricator manufacture structural steel?

No. **STOP** **Å** and proceed to sign the form.

Yes. Complete Section N. Workmanship (Structural Steel Only)

<b>N</b>	<b>WORKMANSHIP (STRUCTURAL STEEL ONLY)</b>
N-1	<b>Auditor:</b> Observe a fabrication project either in progress or just completed and provide the following information: <ul style="list-style-type: none"> <li>■ Project Name: _____</li> <li>■ Fabrication is <input type="checkbox"/> In Progress                      <input type="checkbox"/> Fabrication was completed on: _____</li> </ul>

