



PLANT QUALITY CONTROL

SET UP LOCATION: _____

	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
DATE OF INSPECTION:										
FOR THE WEEK OF:										
SHIFT:										
JOBS PRODUCED OR	1		1		1		1		1	
ORDER NUMBERS	2		2		2		2		2	
	3		3		3		3		3	
<u>LUMBER:</u>										
MOISTURE CONTENT CONFORMING	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
GRADE/SPECIE MATCH ENGINEERING	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
LUMBER GRADEMARKED	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
<u>ASSEMBLY:</u>										
JOINT ACCURACY CONFORMING	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
PLATE PLACEMENT CONFORMING	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
PLATE SIZES CONFORMING	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
PLATE CONTACT AREAS FREE OF DEFECTS	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
PLATE FULLY PRESSED	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
ENGINEERING FOR EACH JOB ON FILE	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
<u>STORAGE AND HANDLING:</u>										
TRUSSES PROPERLY STORED	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
DAMAGE NOTED	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO
<u>REPAIRS:</u>										
NUMBER OF TRUSSES REPAIRED										
EXPLANATION OF REPAIRS										
<u>PLANT QC INITIAL OR SIGN:</u>										

NOTE: A MINIMUM OF 3 TRUSSES PER WEEK, PER SETUP LOCATION, PER SHIFT SHALL BE INSPECTED.