Scientific/SAofEE Adhesive Anchors: Inspection Checklist

SLAC Environment, Safety and Health Field Safety and Building Inspection Office

Special Inspection in accordance with the California Building Code (CBC), Chapter 17

Building #: _____ Room #: _____

Project name: _____ Project location: _____

Project plans, specifications and manufacturer's installation instructions are provided and were reviewed:

☐ Yes ☐ No (Do not proceed: contact project manager for direction)

Weather *(check all that apply)* ☐ Clear ☐ Overcast ☐ Rain ☐ Windy ☐ Indoor Air Temp.: _____ degrees ☐ Fahrenheit ☐ Centigrade

Product

Manufacturer: _____ Adhesive Expiration Date: _____

Product Name: _____ Lot Number: _____ _____

☐ Specified dispenser ☐ Specified mixer ☐ Discarded initial adhesive (per manufacturer's instructions)

Gel time: _____ ☐ minutes☐ hours Cure time: _____ ☐ minutes☐ hours

Adhesive Element

Insert type *(check one)*: ☐ All-thread ☐ Internally threaded ☐ Rebar ☐Other: _____

Material: ☐ Standard ☐ Stainless Steel ☐ High Strength ☐ Other: _____

Steel grade/coating:_____ Length: _____ ☐ inches ☐ millimeters

Rod/bolt diameter: ☐ 3/8" ☐ 1/2" ☐ 5/8" ☐ 3/4" ☐ 7/8" ☐ 1" ☐ 1 1/4" ☐ Other: _____ # of Bolts: _____

Rebar: ☐ #3 ☐ #4 ☐ #5 ☐ #6 ☐ #7 ☐ #8 ☐ #9 ☐ #10 ☐ #11☐ Other: _____ # of Rebar's: _____

Base Material

Base material type: ☐ Concrete ☐ Light Weight Concrete ☐ Brick ☐ CMU ☐ Other: _____

Base material strength (psi): ☐ 2000 ☐ 2500 ☐ 3000 ☐ 4000 ☐ 5000 ☐ Other: _____

Base material thickness: _____ ☐ inches ☐ millimeters

Base material temperature: _____ ☐ Fahrenheit ☐ Centigrade

Drilling & Hole Cleaning

Drill bit diameter: _____ ☐ inches ☐ millimeters Hole depth: _____ ☐ inches ☐ millimeters

Hole Condition: ☐ Dry ☐ Water Saturated ☐ Water Filled ☐ Under water

Hole Cleaning: ☐ Compressed air ☐ Hand pump ☐ Wire brush ☐ Nylon brush ☐ Vacuum ☐ Other: _____

Hole cleaning in accordance with manufacturers' printed installation instructions:

☐ Yes (Mandatory) ☐ No (Required - reason for non-compliance:)

Application

Anchor insertion: ☐ Twisting motion ☐ Annular gap filled with adhesive ☐ Air void free

Anchor spacing: _____ ☐ inches ☐ millimeters ☐ Per Base Plate Plan

Edge distance: _____ ☐ inches ☐ millimeters ☐ Per Base Plate Plan

Specified embedment: _____ ☐ inches ☐ millimeters Actual embedment: ____ ☐ inches ☐ millimeters

Approval

Responsible Engineer (*print name*): _____ Date: _____

Response Engineer Signature: _____ Phone number: _____

Date of Submittal to BIO: _____ (Contact Plan Check Coordinator, Cheryl Nadler, cnadler@slac.stanford.edu [x4363])