

# FORM D

Construction Productivity & Quality Group  
Quality and Certification Department

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## CONQUAS STRUCTURAL WORKS Summary of Welding Test Records

**PROJECT NAME:** \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ **PROJECT ID NO:** \_\_\_\_\_

- Submit Magnetic Particle Inspection/Radiographic Examination/Ultrasonic Examination/ Dye Penetration/Others. Submit NDT, MPI, UT Test reports. (soft or hard copy)
- Attach additional pages where necessary. QP to endorse on all pages of declaration.
- **All FORMS to be submitted no later than 3 months after project's TOP date.**

S/N	Type of Test	Location / Reference Number	Date of Test	Pass/Fail

I hereby certify that the enclosed results refer to first time testing (Re-Tests Excluded) and the above declaration is correct

\_\_\_\_\_ **Structural Qualified Person's name & company**
\_\_\_\_\_ **Signature/Date/QP's Stamp**