QA/QC-6
01-01-08

NCDOT
HOT MIX ASPHALT QUALITY CONTROL CHART

YEAR _____

TYPE MIX: _____ CONTRACTOR: _____

JMF NO. _____ PLANT LOCATION: _____ MIX PARAMETER: _____

CONTROL LIMITS

QC TEST DATA SOLID (——) BLACK
QC MOVING AVERAGE SOLID (——) RED
QA TEST DATA SOLID (——) BLUE

MOVING AVG. LIMITS DASHED (– – –) GREEN
INDIVIDUAL LIMITS DASHED (– – –) RED

SAMPLE NUMBER

NOTE: THIS FORM TO BE MAINTAINED FOR EACH MIX DESIGN AT QC LAB SITE AND UPDATED ON A DAILY BASIS.

* PRINT QA /QC TECHNICIAN'S NAME w/HiCAMS#: _____

* BY PROVIDING THIS DATA UNDER MY SIGNATURE AND /OR HiCAMS CERTIFICATION NUMBER, I ATTEST TO THE ACCURACY AND VALIDITY OF THE DATA CONTAINED ON THIS FORM AND CERTIFY THAT NO DELIBERATE MISREPRESENTATION OF TEST RESULTS, IN ANY MANNER, HAS OCCURRED.

* QA /QC TECHNICIAN'S SIGNATURE: _____