

RMCAO CHECKLIST FOR CONCRETE PUMPING

Project: _____

Location: _____

Directions: _____

1. Contacts

Who	Name	Phone	Mobile	Fax	E-Mail
C. Contractor					
RMC Supplier					
Pump Contractor					

2. General Conditions

Start Time	Pump:	am/pm	Concrete:	am/pm
Placement Location	<input type="checkbox"/> Slabs	<input type="checkbox"/> Walls	<input type="checkbox"/> Footings	Other
Placement Rate (m ³ /hr.)		Volume (m ³)		
Type of Pump	<input type="checkbox"/> Regular	<input type="checkbox"/> Z-Boom	<input type="checkbox"/> Telescoping	<input type="checkbox"/> Trailer
Size of Pump (m)		Pipeline dia, mm		
Pumping Distance (m)	Vertical		Horizontal	
Slump/Air Spec	<input type="checkbox"/> Point of Discharge		<input type="checkbox"/> Point of Placement	
Testing	<input type="checkbox"/> Point of Discharge		<input type="checkbox"/> Point of Placement	
Priming Agent	<input type="checkbox"/> Grout		<input type="checkbox"/> Slick Pack	

3. Concrete Mixture

Strength (MPa)	28 days:		Other:	
Max Size of Aggregate (mm)		(no larger than 1/3 pipeline diameter)		
Density (kg/m ³)		Lightweight	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Slump (mm)		Air (%)		
Water Reducer	<input type="checkbox"/> Regular	<input type="checkbox"/> MRWR	<input type="checkbox"/> HRWR	
Fibres	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
Special Requirements				
Set Time Requirements (hr.)	Initial:		Final:	
Water Addition Permitted	<input type="checkbox"/> Yes	<input type="checkbox"/> No		

4. Jobsite/Safety

Wash Out Area	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Location:
Power Lines	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Safe Set Up Area	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Restrictions:
Clean Water Available for Washout	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

5. Notes
