

# TANKING MEMBRANE SYSTEM

## QUALITY CONTROL ASSURANCE SCHEDULE

To be completed by Hitchins' Approved Applicator and Building Contractor of the Project and submitted to Hitchins New Zealand Ltd with warranty application form

Project Name:		
Project Address:		
Building Contractor:		
		Phone:
Applicator:		
Commencement Date:		Completion Date: <span style="border: 1px solid black; width: 20%;"></span>

SITE PRE-INSPECTION SIGN-OFF	SIGNATURE	DATE
1) Consented project drawings and specifications sighted		
2) The current Worksafe "Working in Confined Spaces" publication sighted		
3) Site conditions are acceptable to the applicator to comply and work in a safe manner		
4) Excavation provides adequate room to install the membrane allowing for installation equipment		
5) That excavated ground is firm and stable with no concerns of collapse or fall-in		
6) Trenches free of water and substrate surface free of mud splashes		
7) The substrate is sound, clean, cured, dry and acceptable, or		
8) The proposed preparation of the substrate is acceptable		
9) Suppliers product technical data sheets available/provided		
10) Suppliers product safety sheets available/provided		
11) Finish ground level for tanking material defined		

BUILDER SUBSTRATE CHECK SIGN-OFF	SIGNATURE	DATE
1) Compact hard course fill sand-binded surface, firm with no sharp stones		
2) Site concrete broom or wood float finish provided		
3) On site or pre-caste concrete free of release agents		
4) Concrete surface free of nibs, splashes and of acceptable condition		
5) Concrete block pointing struck clean, free of concrete splashes, nibs are of acceptable condition		
6) External corners chamfered, internal corners coved		
7) Expansion joints where required and of acceptable size		
8) All surfaces clean and dry ready for tanking		

APPLICATORS MEMBRANE INSTALLATION CHECK SIGN-OFF	SIGNATURE	DATE
• Supplier specification sighted and adhered to		
• Specified products on site for installation		
• Substrate checked, prepared and primed		
• Protective gear worn where and when required		
• Membrane installed as per supplier written specification		
• Expansion joints treated – slip layer installed		
• Double membrane layer to all internal/external corners		
• Double membrane layer at junction of foundation to wall		
• All overlap flashings installed and checked		
• Double membrane layer in high water level		
• Pipe intrusions flashed and sealed		
• Hold bar installed at top edge membrane, or -		
• Unolastic bandage to top edge of membrane		
• Exposed wall above sealed if required		
• Membrane protection and drainage sheet installed		
• Hitchins Technical Representative Visit/Inspection		

COMPLETION SIGN-OFF	YES / NO	DATE
* All of the above checked by builder and applicator		
* Builder satisfied acceptable installation achieved		
* Any subsequent damage of membrane is the responsibility of builder to rectify		

Building Firm Name:

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Builder Representative Title/Position

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Applicator Firm Name

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Applicator Representative Title/Position

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Builder Sign

Applicator Sign

Date

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**Hitchins New Zealand Ltd**

**Specialists in Building Materials and Systems**