

APPENDIX 9

QUALITY ASSURANCE INSPECTION FORM - SUBMARINE TOUCH UP AREAS

SHIP/REFIT: \_\_\_\_\_ AREA: \_\_\_\_\_  
 JCN: \_\_\_\_\_

Process	Date/Time Start	Date/Time Finish	Type/Color	Batch Number	Shelf Life Exp.
				<u>A</u>	
				<u>B</u>	
				<u>A</u>	
				<u>B</u>	
				<u>A</u>	
				<u>B</u>	
				<u>A</u>	
				<u>B</u>	
				<u>A</u>	
				<u>B</u>	

Surface preparation condition is in accordance with SSPC-SP \_\_\_\_\_  
 Conductivity Reading \_\_\_\_\_  
 Average Surface Profile \_\_\_\_\_  
 Final Average System DFT's \_\_\_\_\_ (See attached DFT data record)  
 Cure to Service Date and Time \_\_\_\_\_

Attach Profile Tape

SIGN FOR COMPLETE \_\_\_\_\_ DATE \_\_\_\_\_  
 (NACE I OR EQUIVALENT)