



WORKSHEET / REQUEST FORM FOR CONCRETE CUBE COMPRESSION TEST

Contractor	P.O. Box No.		Sampling Certificate no.		
	Telephone No.			Delivery note no.	
	Fax No.			Lot no.	
Client	Structure Reference:		Lot Size	m ³	
Consultant			Sample Size	m ³	
Project Name			Slump measured	mm	
Project No.			Ambient Temperature	°C	
Plot no.			Placing Temperature	°C	
Project Location			Air Content	%	

Supplier and Source of Concrete	
Casting Date / Date	/ / (dd/mm/yy)
Delivery to Site / Time	AM / PM (hr:min)
Specified Strength (N/mm ²)	at days
Mix Details (Kg/m ³)	
Place of Casting of Cubes	
Name of Person Casting Cubes	
Cubes Cast and Supplied by	Contractor / Consultant
Number of Cubes	

Nominal Size (HxWxL),mm	150x150x150 /
Method of Compaction	Manual (hand) / Vibration
Equipment used for Compaction	Tamping Bar / Vibratory Table
Sampling Method	BS 1881: Part 101: Amd 6089:89 / Others
Curing & Storage conditions at site	BS 1881: Part 111: 1983 (Amd 6102) / Other
Treatment to prepare if reduction necessary	Sawing / Coring / Breaking (only specify if necessary)
Compression Test Method	BS 1881: Part 116: 1983 (Amd6097, 6720)
Volume Determination	BS 1881: Part 114: 1983: Amd. 6098:89 (Cl. 6.2.2)

Signed:	
Contractor:	
Consultant:	
Request Reviewed by:	
Date:	

Supplied Cube ID	Required Test Age (days)/Date	Laboratory Specimen Id.	Age/Date of Compression Test	Checked nominal dimension within 1%	Dimensions (mm)	Average	Mass (kg)	Density (kg/m ³)	Maximum Load at Failure (kN)	Compressive Strength (N/mm ²)	*Fracture Type	*Condition when Received
	days		days	Yes / No								
	/ /		/ /									
	days		days	Yes / No								
	/ /		/ /									
	days		days	Yes / No								
	/ /		/ /									
	days		days	Yes / No								
	/ /		/ /									
	days		days	Yes / No								
	/ /		/ /									

Sample Received by:	Date:	
	Time:	
Resource Reviewed by:	Date Scheduled	Date Required
Date:		
Treat of Specimen for Reduction	Not Required / Other	
Treatment to Remove fins	Used a grinding stone/ Not Required / other	
Laboratory Curing and Storage Condition	BS 1881: Part 111: 1983 (Amd 6102)	
Moisture Condition of Specimen at Test	Moist / Saturated / Oven Dried	
Mass and Density Measurement (7/28/___)	As Received / Saturated / Oven-dried	
Test Age	7 days/28 days/___	
NL Project No.	Lab/	
NL Test Request No.		
NL Sample No.	NLS#	
NL Report No.	NLR#	
Report Date		
Comp. Machine Asset no.	NL.CM	
Balance Asset No.	NL.EB	
Caliper Asset No.	NL.VC	

*Conditions when received: A = Good, B = Poor Compaction, C = Honeycombing, D = Bad Dimensions, E = Edge Broken and F = Corner Broken

*Fracture Type: 1 = Satisfactory, 2 = Unsatisfactory

Notes:

Tested by: _____ Checked by: _____

WS #: 11

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Authorized By Alaa Bary