Adhesive Anchors Inspection Checklist for Concrete and Masonry

Periodic special must be performed where required in accordance with Section 1705.1.1 and Table 1705.3 of the 2012 IBC, or Section 1704.15 of the 2009 IBC and Table 1704.4 or Section 1704.13 of the 2006 or 2003 IBC, whereby periodic special inspection is defined in Section 1702.1 of the IBC and this report. (See Structural Drawings for Inspection requirements)

Project Name: _____

Project Location: _____

Weather: _____ Air Temperature: _____ (°F / °C)

CODES	Seismic Zone/ Seismic Design Category
☐ IBC 2003 ☐ IBC 2006 ☐ IBC 2009 ☐ IBC 2012	

Adhesive

Product Name/Manufacturer: _____

Lot No.: _____

ICC-ES Report No.: _____

Adhesive expiration Date: ___/___/___ ☐ Specified Dispenser ☐ Specified Mixer

Discard Initial Adhesive: _____ (# trigger pulls)

Adhesive Tempature: _____ (°F / °C) Gel Time: _____ Cure Time: _____
(per manufacturers installation instructions)

Adhesive Element

Type: ☐ All-Thread ☐ Internally Threaded ☐ Torque-Controlled ☐ Rebar ☐ Other _____
(Safeset™ only to be used with Hilti HIT-HY 200)

Material: ☐ Standard ☐ Stainless Steel ☐ High Strength

Steel Grade/Coating: _____ Length: _____ (in/mm)

Rod Diameter: ☐ 3/8" ☐ 1/2" ☐ 5/8" ☐ 3/4" ☐ 7/8" ☐ 1" ☐ 1-1/4" ☐ Other _____

Rebar: ☐ #3 ☐ #4 ☐ #5 ☐ #6 ☐ #7 ☐ #8 ☐ #9 ☐ Other _____

Base Material

Base Material Type: ☐ NW Concrete ☐ LW Concrete ☐ Brick ☐ CMU ☐ Other _____

Base Material Strength: ☐ 2000 psi ☐ 3000 psi ☐ 4000 psi ☐ Other _____

Base Material Thickness: _____ (in/mm)

Base Material Temperature: _____ (°F / °C)

Drilling & Hole Cleaning

Drill Bit Diameter: _____ (in/mm) Hole Depth: _____ (in/mm)
(core bit diameter, if approved)

Drill Bit Type: ☐ Carbide-Tip Drill Bit (ANSI B212.15-1994) ☐ Diamond Core Bit (if appropriate and allowed) ☐ Hollow Drill Bit (Safeset™ only to be used with Hilti HIT-HY 200) ☐ Other _____

Hole Condition: ☐ Dry ☐ Water Saturated ☐ Water Filled ☐ Under Water

Hole Cleaning: ☐ Compressed Air ☐ Hand Pump ☐ Wire Brush ☐ Other _____

Hole cleaning in accordance with manufacturers' printed installation instructions: ☐ Yes ☐ No

Application

Anchor Application: (please check all that apply) ☐ Tension ☐ Shear ☐ Overhead ☐ Other_____

Anchor insertion: ☐ Twisting motion ☐ Annular gap filled with adhesive ☐ Air Void Free Injection

Anchor Spacing: _____ (in/mm) Edge Distance: _____ (in/mm)

Embedment (h_{ef}): _____ (in/mm) Installation Torque (if required): _____ (ft-lb/Nm)

Completed by: _____ (Signature) Date:_____/_____/_____

_____ (Print) Company:_____

_____ (Title)