Mechanical Rebar Coupler Splice Report (CSR)
(CFN-1087)

Work Package No.: _____

Task No.: _____

DMC No.:			**Building/Location:**		
Concrete Placement ID No.:			**Quality Level:** Q RS CC		
Prepared By:					**Date:**
QC/PI Concurrence:_____ *Print/Type Name/Signature*					**Date:**
Installer ID No.		**Rebar Size**		**No. Splices**	
Installer Badge No.		**Heat No.**			

Coupler ID	***Splice Type**	**Pre Splice**		**Post Splice**			
		Visual Initial/Date		**Fit-up Initial/Date**		**Torque Initial/Date**	
	P or Q	**Accept**	**Reject**	**Accept**	**Reject**	**Accept**	**Reject**

Comments:

M&TE		
Equipment b2⓪Y	Cal Date:	Cal Due Date:

Final Acceptance			
QCE for Q QCE or FE for RS	Print Name:	Signature:	Date:

*Splice Type: P=Production Q=Qualification

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Continuation Sheet

DMC No.:				**Concrete Placement ID No.:**			
Installer ID		**Rebar Size**		**No. Splices**			

Coupler ID	***Splice Type**	**Pre Splice**		**Post Splice**			
		Visual Initial/Date		**Fit-up Initial/Date**		**Torque Initial/Date**	
	P or Q	**Accept**	**Reject**	**Accept**	**Reject**	**Accept**	**Reject**

Comments:

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