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| 大平面座形フランジ継手チェックシート | | | | | | | | | | | | | 〇〇　　年　　月　　日 | | | | |
| |  |  | | --- | --- | | 工事名 |  | | 図面No.・測点 |  | | 呼び径 |  |  |  | | --- | | 係員 | |  | | | | | | | | | | | | | | | | | | |
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| 管No. | | |  | |  | |  | |  | |  | | |  | |  | |
| 管の種類 | | |  | |  | |  | |  | |  | | |  | |  | |
| 略　図 | | |  | |  | |  | |  | |  | | |  | |  | |
| 継手No. | | | |  | |  | |  | |  | |  | | |  | |  |
| 清掃 | | | |  | |  | |  | |  | |  | | |  | |  |
| 接着剤使用の有無 | | | |  | |  | |  | |  | |  | | |  | |  |
| ①ボルト | | 数 | |  | |  | |  | |  | |  | | |  | |  |
| トルク  （N・ｍ） | |  | |  | |  | |  | |  | | |  | |  |
| ②ガスケットの位置 | | | |  | |  | |  | |  | |  | | |  | |  |
| 判定 | | | |  | |  | |  | |  | |  | | |  | |  |
| 備考  現場代理人　　　　　　　　　　　㊞ | | | | | | | | | | | | | | | | | |
| 判定基準 | ①ボルト締め付けトルク：表の標準締め付けトルクによる。  ②ガスケットの位置 ：フランジ面の平行にかたよりなく接合されていること、およびガスケットのずれがないこと。 | | | | | | | | | | | | | | | | |