

QC-21011/16/2025-QC / TA



NEW DELHI MUNICIPAL COUNCIL

MATERIAL TESTING LABORATORY QUALITY CONTROL CELL VIDYUT BHAWAN, NEW DELHI

PROFORMA FOR COMPRESSIVE STRENGTH OF CEMENT

1. Name of work 1 2. Details from where sample collected : 3. Name of Division 1 4. Name of Executive Engineer : 5. Name of Asstt. Engineer 6. Name of Junior Engineer ÷ 7. Name of Agency ÷ 8. Date of Collection of Sample : 9. Grade of Cement : 10. Make of Cement : 11. No. of Specimens : 12. Mark on Specimens ÷ 13. Quantity of Sample 2 14. Required Strength 1 15. Remarks :

Sign. of J.E () Sign. of Contractor RESULTS		Sign. of A.E. () OF TEST	Sign. E.E. ()
Mark	Sr. No.	Wt. of the Specimen in Kgs	Load in KN	Compressive strength in N/mm ²	Average Compressive strength in N/mm ²