STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

ITS Quality Checklist
Fiber Optic Cable Splicing & Termination

ITSFM015
Rev. 11/16

Date:	Contract ID:	Financial Project ID:	Inspector:
Plan Sheet	MP	Sta.	Site Identification Name

CONFORMED	NCR*	N/A	INSPECTION REQUIRED
❑	❑	❑	Review approved traffic maintenance and protection plan and carry copy to the field.
❑	❑	❑	Monitor traffic control setups and recommend adjustment if necessary.
❑	❑	❑	Verify splicing technicians are trained through an approved pre-qualification group.
❑	❑	❑	Verify tools, test equipment, and splicing equipment are clean and in excellent working order.
❑	❑	❑	Verify fusion splicers, high precision cleavers, and mechanical or other industry accepted splicing methods are calibrated and labeled according to manufacturer's specifications.
❑	❑	❑	Verify that fusion splicing equipment is not introduced into any harsh environments or handling.
❑	❑	❑	Verify fusion splices or rotary mechanical splices performed are a maximum of _____ dB per splice, and _____ dB for mass fusion splices as indicated by the splicing machine.
❑	❑	❑	Verify splice closure is properly installed per the manufacturer's specifications and mounted on the splice vault wall.
❑	❑	❑	Verify patch panel is properly installed per the manufacturer's specifications and mounted in the cabinet.
❑	❑	❑	Document all changes from the approved plans and specification to the as-built drawings.

***Complete and Attach a Nonconformance Report for all Nonconforming items noted.**

QUALITY INSPECTOR	DATE	DOC CONTROL NO.