

## CONCRETE MASONRY UNIT TEST REPORT

School District: \_\_\_\_\_ LEA #: \_\_\_\_\_ DSA FILE #: \_\_\_\_\_ - \_\_\_\_\_  
 Attn: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ DSA APPL #: \_\_\_\_\_ - \_\_\_\_\_  
 Address: \_\_\_\_\_ Lab Facility: \_\_\_\_\_  
 \_\_\_\_\_ CA \_\_\_\_\_ Lab Doc. #: \_\_\_\_\_ Lab Job #: \_\_\_\_\_

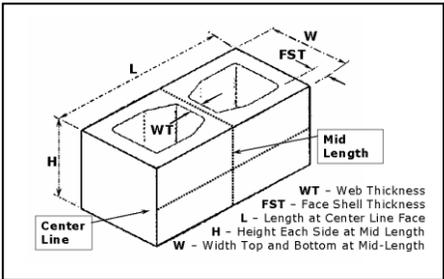
**Project Name:** \_\_\_\_\_ **Structure:** \_\_\_\_\_  
**Report Date:** \_\_\_\_\_ **Sampled At:** \_\_\_\_\_ **Sampled By:** \_\_\_\_\_  
**Block Manufacturer:** \_\_\_\_\_ **Sample Date:** \_\_\_\_\_

**Material Description:** \_\_\_\_\_

Physical Properties of Units (Average) Date Received: \_\_\_\_\_

Length (in.)	**Received Weight (lbs.)	Lightweight	<input type="checkbox"/>	<b>Specimen Size:</b> <input type="checkbox"/> Full <input type="checkbox"/> Reduced <input type="checkbox"/> Coupon
Width (in.)	Moisture Content (%)	Medium Weight	<input type="checkbox"/>	
Height (in.)	Density (pcf)	Normal Weight	<input type="checkbox"/>	

Summary of Tests -	Results	Specified	Conformance
Net Compressive Strength (psi):			<input type="checkbox"/> Yes <input type="checkbox"/> No
Absorption (pcf)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Min. Faceshell Thickness (in.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Minimum Web Thickness (in.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Equivalent Web Thickness (in.)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Equivalent Thickness (in.)			<input type="checkbox"/> Yes <input type="checkbox"/> No



**Compressive Strength - Individual Test Results**

Date Test Started: \_\_\_\_\_

Unit #	Net Area (in <sup>2</sup> )	Max. Load (lbs.)	Net Compressive Strength (psi)	Reason, if Specimen is less than full size	
1				Faceshell Projections	<input type="checkbox"/>
2				Unsupported Projections	<input type="checkbox"/>
3				Test Machine Capacity	<input type="checkbox"/>

\*\* Received weight determined at time of delivery to the job site or from units sampled at the time and delivered to the laboratory in sealed containers for moisture content determination.

**Absorption & Received Moisture - Individual Test Results**

Date Tested: \_\_\_\_\_

Unit #	Ave. Width (in.)	Ave. Height (in.)	Ave. Length (in.)	Absorption (pcf)	Density (pcf)
4					
5					
6					

**ASTM C90 Requirements: (Water Absorption max pcf - Average of 3 Units)**  
 Lightweight - Less than 105 pcf  
 Medium Wt. - 105 to Less Than 125 pcf  
 Normal Wt. - 125 pcf or more

Applicable ASTM Test Methods: \_\_\_\_\_  
 REMARKS: \_\_\_\_\_

ADDITIONAL COMMENTS (DSA-211) ATTACHED.

**The Material**  WAS  WAS NOT SAMPLED AND TESTED IN ACCORDANCE WITH THE REQUIREMENTS OF THE DSA APPROVED DOCUMENTS.

**The Material Tested**  MET  DID NOT MEET THE REQUIREMENTS OF THE DSA APPROVED DOCUMENTS.

cc: Project Architect  
 Structural Engineer  
 Project Inspector  
 DSA Regional Office

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Print Name / Title \_\_\_\_\_