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|  | **REGISTRO DE ESTIBA** | | | | | | | | | | | | | | | | | | | | | | | | **F-GdC-03** | | | |
| **DC Nº** |  | | | | | **OBRA** | | |  | | | | | | | | | | | | | | | | **FECHA** | | **/ /** | |
| **ESTIBA DE CAÑOS DE ACERO** | | | | | | | | | | | | | | | | | | | | | | | | | **HOJA** | | **/** | |
| **NÚMERO DE UNIDAD DE APILAMIENTO** | | **TIPO DE APOYO** | | **CAÑOS CON TAPAS** | **LUGAR DE ESTIBA**  **(DIRECCIÓN,LOCALIDAD Y PROVINCIA)** | | **PROTECCIÓN**  **SOLAR** | | | **SE CUMPLEN REQUISITOS**  **NAG-109** | **DETALLE DE APILAMIENTO** | | | | | | | | | | | | | | | | | |
|  | | **MADERA**  **CAÑO** | | **SI / NO** |  | | **SI / NO**  **N/A** | | | **SI / NO** |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  |
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|  | | **MADERA**  **CAÑO** | | **SI / NO** |  | | **SI / NO**  **N/A** | | | **SI / NO** |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  |
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|  | | **MADERA**  **CAÑO** | | **SI / NO** |  | | **SI / NO**  **N/A** | | | **SI / NO** |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  | |  |
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| **FIRMAS** | | | **EJECUTOR DEL REGISTRO** | | | | | **RESPONSABLE DE CALIDAD DE LA CONTRATISTA** | | | | | | | **RT CONTRATISTA** | | | | | | | | | | | | | |

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|  | | **REGISTRO DE ESTIBA** | | | | | | | | | | | | | | | | | | | | | | **F-GdC-03** | | | | | | | | | |
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| **ESTIBA DE CAÑOS DE POLIETILENO** | | | | | | | | | | | | | | | | | | | | | | | | **HOJA** | | | | | **/** | | | | |
| **Nº DE UNIDAD DE APILAMIIENTO** | **TIPO DE APILAMIENTO** | | | **LUGAR DE ESTIBA**  **(DIRECCIÓN,LOCALIDAD Y PROVINCIA)** | | **CAÑOS A LA INTEMPERIE** | | **PROTECCIÓN SOLAR** | **SE CUMPLEN REQUISITOS**  **NAG-140** | **CONTROLES DE ESTIBA** | | | | **DETALLE DE APILAMIENTO**  **(tubos sueltos o en fardos)** | | | | | | | | | | | | | | | | | | | |
| **APILAMIENTO EN IGUAL SDR Y Dn (tubos sueltos)** | **12 NIVELES DE APILAMIENTO (tubos sueltos)** | | **ALTURA MÁXIMA DE APILAMIENTO DE ROLLOS (2,4m)** |
|  | **EN FARDOS**  **EN ROLLOS VERTICALES**  **EN ROLLOS HORIZONTALES**  **SUELTOS** | | |  | | **SI / NO** | | **SI / NO** | **SI / NO** |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |  |  |  |  |
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|  | **EN FARDOS**  **EN ROLLOS VERTICALES**  **EN ROLLOS HORIZONTALES**  **A GRANEL** | | |  | | **SI / NO** | | **SI / NO** | **SI / NO** |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  | |  |  |  |  |
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| **FIRMAS** | | | **EJECUTOR DEL REGISTRO** | | | | | **RESPONSABLE DE CALIDAD DE LA CONTRATISTA** | | | | **RT CONTRATISTA** | | | | | | | | | | | | | | | | | | | | | |