

FILLET WELD SOUNDNESS TEST					
Company:				Date:	
FWST No:		Welder Name:		ID:	
Number of Electrodes:		Welding Position:		Progression	
Dihedral Angle:		Transfer Mode:			
Base Metal Specification:		T1 Thickness:		T1 Heat No.	
Base Metal Grade:		T2 Thickness:		T2 Heat No.	
Test Parameters					
Test Parameter	Pass			Joint Detail/Pass Layout	
	1	2	3		
Process					
AWS Electrode or Electrode/Flux Specification and Classification					
Electrode Diameter					
Filler Metal Manufacturer and Brand name					
Shielding Gas, Flow Rate, and Dew Point OR Flux Manufacturer and Brand Name					
Current Type and Polarity					
Preheat/Interpass Temp.					
Voltage					
Amperage or Wire Feed Speed					
Travel Speed					
Heat Input					
Test Weld Size		mm [in]	Test Weld # of Passes:		
TEST RESULTS					
Item		Pass/Fail			
Visual Examination (7.19.5)					
Macroetch Test (7.19.2)		1.	2.	3.	
WITNESS STATEMENT					
We, the undersigned, certify that the above described FWST has been performed and evaluated in accordance with Clause 7 of the AASHTO/AWS D1.5M/D1.5: () <i>Bridge Welding Code</i> .					
Owner/3rd Party Witness:		Name:			
Date:		Signature:			
Manufacturer Witness:		Name:			
Date:		Signature:			
Testing Authorized By:		Name:			
Date:		Signature:			

Form N-5—Procedure Qualification Record (PQR) for Fillet Welds