

STREET TRANSPORTATION DEPARTMENT

DESIGN & CONSTRUCTION MANAGEMENT DIVISION

MATERIALS LABORATORY

	Request For Test		
Project Number:	Project Name:	Date Form Prepared:	
To do not Free dings.		Dualast Ctatura	

Federal Funding:	7		Project Status:	
Yes No			(check all that apply)	
Federal Funding Source:	Project Address:		Plans available	
			Specs available	
			Soils Report	
ADOT Tracs Number:	Major Cross Streets:		Minimum Test Schedule Required	
ABOT	Major or oss car coas.		Close Out Book Required	
Federal Aid Number:	NTP Date:		Duration (calendar days):	
Client Department:	Contractor:		Inspection Supervisor:	
			Name:	
			Cell Phone:	
Client Department PM:	Contractor PM:		Chief Construction Inspector:	
	Name:		Name:	
	Cell Phone:		Cell Phone:	
Streets PM:	Contractor Superintendent:		Senior Construction Inspector:	
	Name:		Name:	
	Cell Phone:		Cell Phone:	
	As	sphalt Testing		
Plant:	Plant No.:		Mix:	
Marshall:	No. of Tons:		No. of Samples:	
Project Scope (check all that apply)				
Sport Court	Cast in Place '		Dry Well	
Slab on Grade	Sports Field L	ighting	Storm Water Retention Area	
Sidewalk	Soil Import		Storm Drain	
Curb/Gutter	Fencing		Underground Utilities	
Asphalt	Ramada/Shade Structure		Utility Adjustments	
Concrete	Water		On Grade Asphalt Densities	
Railroad Crossing	Sewer		Hot Plant Inspection	
Other:				
Date project assigned:		Materials Lab Project Coord	dinator:	
Form prepared by:		Private lab assigned:		
MTS Required by:		Date sent to lab management:		
Notes:		<u>l</u>		