MATT MENU SELECTION - 09

DOTD 03-22-0702
Rev. 11/97

Louisiana Department of Transportation and Development
ASPHALT CEMENT

Project No. ___-___-____ Date Received in Laboratory _____

Material Code ____ *(635,636,637 or 638)* Lab. No. ___-_____ Sec. 22 Lab # _____

Date Sampled __-__-__ Submitted By ____

Quantity _____ Units ___ (GAL, L, kL) Purpose Code ___

Spec. Code ___

Source Code ____ Date Tested __-__-__ Sec. 22 Date Tested ____/____/____

P O No. _____

Ident. _____

Remarks 1 _____

Remarks 2 _____

Item No. _____ Sampled By: _____ Date: _____

Inspector Name: _____ Phone: _____ Date: _____

MATERIALS AND TESTING SECTION RESULTS:

DISTRICT LAB RESULTS:

DISTRICT LAB NUMBER . . . . . ___-_____

CERTIFICATE OF DELIVERY LAB NUMBER . . . . . 22-_____

Tank Penetration _____ % Difference _____

Tank Viscosity _____ % Difference _____

*PENETRATION, 25 °C, 100 g, 5 SEC., dmm (AASHTO T 49) . . . . . ___

1 _____ 2 _____ 3 _____

*VISCOSITY, ROTATIONAL, SPINDLE # SC 4-_____, _____ . . ___

RPM, 135°C, Pa·s (_____mPa·s x 0.001) (AASHTO TP48)

NOTE:** ***ENTER "P" FOR PASSING RESULTS. AN ENTRY OF "F" IS NOT ALLOWED. IF MATERIAL FAILS, SUBMIT TO THE MATERIALS LAB .

Tested by: _____ Date: _____ Checked by: _____ Date: _____

APPROVED BY: _____ Date: _____