

APPENDIX

(THIS PAGE INTENTIONALLY LEFT BLANK.)

9.2 Construction Forms

FORM NO.	FORM TITLE (Use Links for Fillable Version)	
C-14	Pile & Driving Equipment Data Form	Metric Version
C-15A	Test Pile Record	Metric Version
C-15A-2	Test Pile Record (continuation)	Metric Version
C-15B	Pile Loading Record – Quick Load Test	Metric Version
C-15B-2	Pile Loading Record – Quick Load Test (continuation)	Metric Version
C-15B-3	Graph for Pile Loading Record (Quick Load Test)	Metric Version
C-15C	Proposed Pile Lengths	
C-16C	Driving Record of Concrete Piling	
C-16S	Driving Record of Steel Piling	
C-17	Material Pit Release	
C-19	Time Extension Request for Working Day or Calendar Day Projects	
C-19A	Time Extension Request for Calendar Date Projects	
C-20	Progress Report	
C-21	Partial Payment of Stored Materials	
C-23	Affidavit for Payment of Debts Incurred on Construction Projects	
C-24	Weekly Report of Railway Inspection and/or Flagging	
C-25	Daily Inspection Report of Traffic Control Devices	
C-25A	Crash Report	
C-32	Drilled Shaft Modification Request	
C-34	Stormwater Inspection Report and BMP Certification	
C-35	Drilled Shaft Pouring Record	Metric Version
C-35-2	Graph for Drilled Shaft Pouring Record	Metric Version
C-36	Test Drilled Shaft Loading Record	
C-37	Stormwater Noncompliance Notification Report	
C-38	Stormwater Turbidity Sampling Report	
C-40	Material Submittal	
QC/QA-1	Summary of Initial Test Results	
QC/QA-2	Summary of Referee Test Results	
QC/QA-3	Asphalt Pay Factor Adjustment Worksheet	
BC-101	Inspector's Daily Reports	

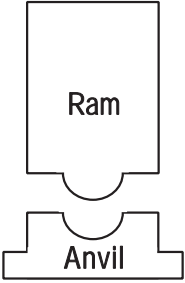
(THIS PAGE INTENTIONALLY LEFT BLANK.)

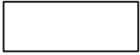
FORM C-14 **ALABAMA DEPARTMENT OF TRANSPORTATION**
 Revised 08-07-95 **PILE AND DRIVING EQUIPMENT DATA FORM**

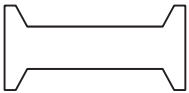
Project Number	County	Division
----------------	--------	----------


Pile Driving Contractor or Subcontractor _____	Bridge Identification Number _____
---	---------------------------------------

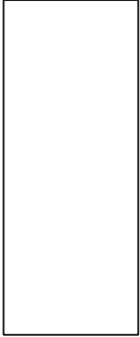
Details of access method to pile top for dynamic testing are: Attached Not Applicable

Hammer Components		Hammer	Manufacturer: _____ Model: _____ Type: _____ Serial No.: _____ Rated Energy: _____ (ft.-lbs.) at _____ (ft.) Length of Stroke Modifications: _____ _____ _____
--------------------------	---	---------------	---

	Capblock (Hammer Cushion)	Material: _____ Thickness: _____ (in.) Area: _____ (in. ²) Modulus of Elasticity - E : _____ (P.S.I.) Coefficient of Restitution - e : _____
---	--	---

	Pile Cap	Helmet <input checked="" type="checkbox"/> Bonnet <input type="checkbox"/> Anvil Block <input type="checkbox"/> Drivehead <input type="checkbox"/>	Weight : _____ (lbs.) Note: Should include weight of striker plate.
---	-----------------	---	--

	Pile Cushion	Cushion Material: _____ Thickness: _____ (in.) Area: _____ (in. ²) Modulus of Elasticity - E : _____ (P.S.I.) Coefficient of Restitution - e : _____
---	-------------------------	---

	Pile	Pile Type: _____ Length (in Leads): _____ (ft.) Weight / Ft: _____ (lbs./ft.) Wall Thickness: _____ (in.) Taper: _____ Cross Sectional Area: _____ (in ²) Design Pile Capacity: _____ (Tons) Description of Splice: _____ _____ Tip Treatment Description: _____ _____
---	-------------	---

Note: If mandrel is used to drive this pile, attach separate manufacturer's detail sheet(s) including weight and dimensions.

Submitted By: _____ Date: _____

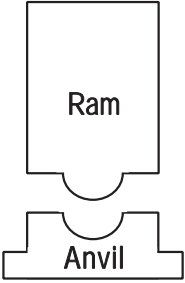
FORM C-14 **ALABAMA DEPARTMENT OF TRANSPORTATION**
 Revised 08-07-95 **PILE AND DRIVING EQUIPMENT DATA FORM**

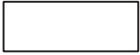


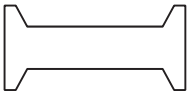
Project Number	County	Division
----------------	--------	----------


Pile Driving Contractor or Subcontractor _____	Bridge Identification Number _____
---	---------------------------------------

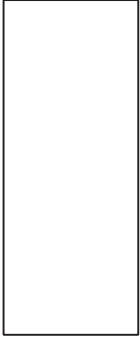
Details of access method to pile top for dynamic testing are: Attached Not Applicable

Hammer Components		Hammer	Manufacturer: _____ Model: _____ Type: _____ Serial No.: _____ Rated Energy: _____ (J) at _____ (m) Length of Stroke Modifications: _____ _____ _____
--------------------------	---	---------------	--

	Capblock (Hammer Cushion)	Material: _____ Thickness: _____ (mm) Area: _____ (mm ²) Modulus of Elasticity - E : _____ (MPa) Coefficient of Restitution - e : _____
---	--	--

	Pile Cap	Helmet <input checked="" type="checkbox"/> Bonnet <input type="checkbox"/> Anvil Block <input type="checkbox"/> Drivehead <input type="checkbox"/>	Mass : _____ (kg) Note: Should include mass of striker plate.
---	-----------------	---	--

	Pile Cushion	Cushion Material: _____ Thickness: _____ (mm) Area: _____ (mm ²) Modulus of Elasticity - E : _____ (MPa) Coefficient of Restitution - e : _____
---	-------------------------	--

	Pile	Pile Type: _____ Length (in Leads): _____ (m) Mass / m: _____ (kg/m) Wall Thickness: _____ (mm) Taper : _____ Cross Sectional Area: _____ (mm ²) Design Pile Capacity: _____ (kN) Description of Splice: _____ _____ Tip Treatment Description: _____ _____
---	-------------	--

Note: If mandrel is used to drive this pile, attach separate manufacturer's detail sheet(s) including mass and dimensions.

Submitted By: _____ Date: _____

TEST PILE RECORD

Project Number		County		Area	
Bridge Station		To Station		Bridge Identification Number	
Road Between		and			
Contractor			Inspector		
Date	Bent No. & Lane		Pile No.		Kind of Soil
Kind of Pile		Size of Pile		Total Length (ft.)	
Elev. Ground Line at Pile		Final Elev. at Top of Pile		Tip Elevation	
Hammer Make		Hammer Model		Hammer Kind	
Hammer Type		Hammer Action		Rated Energy (ft.-lbs.)	
Weight of Hammer (lbs.)			Design Load (from plans) (tons)		
Hammer Cushion: Material		Thickness (in.)		Area (sq. in.)	
Pile Cushion (Before Driving): Material		Thickness (in.)		Area (sq. in.)	
Pile Cushion (After Driving): Material		Thickness (in.)		Area (sq. in.)	
Pile Cap Weight (lbs.)					
Height Of Fall (feet)	Energy Delivered To Pile (E) (ft.-lbs.)	Blows Per Foot Of Penetration (N)	Total Penetration (feet)	Bearing (Ru) (tons)	

REMARKS

- When using open type and gravity hammers, record weight of hammer and height of fall of hammer. Show rated energy when using closed type hammers.
- Energy delivered to pile should be maintained practically constant once record keeping has begun unless specified otherwise by the Engineer.
- Pile cushion is only required with concrete piling.
- Pile cushion thickness after driving must be at least one-half the original thickness.
- The bearing should be determined from the graph of Blows/Foot versus Bearing which is provided from the Wave Equation Analysis or Dynamic Formula of the driving system. If a graph is not provided, refer to Item 505.03(b)2. of the specifications to estimate the bearing capacity using the Dynamic Formula.
- Driving should be continuous. Note any interruptions exceeding one hour.
- Draw sketch on back of this sheet showing location of test pile.
- For continuation of test pile record, use Form C-15A-2.
- Test pile (check one): Static Load Tested ____ Dynamic Load Tested ____ (if static load tested, load test report shall be attached to this report).

Correct _____

Approved _____

Project Manager

Area Operations Engineer

Sheet No. 1 of ____

FORM C-15A **ALABAMA DEPARTMENT OF TRANSPORTATION**
TEST PILE RECORD



Revised 08-07-95

Project Number		County		Area	
Bridge Station			To Station		Bridge Identification Number
Road Between _____ and _____					
Contractor			Inspector		
Date	Bent No. & Lane		Pile No.		Kind of Soil
Kind of Pile		Size of Pile		Total Length (m)	
Elev. Ground Line at Pile		Final Elev. at Top of Pile		Tip Elevation	
Hammer Make		Hammer Model		Hammer Kind	
Hammer Type		Hammer Action		Rated Energy (J)	
Mass of Hammer (kg)			Design Load (from plans) (kN)		
Hammer Cushion: Material		Thickness (mm)		Area (mm ²)	
Pile Cushion (Before Driving): Material		Thickness (mm)		Area (mm ²)	
Pile Cushion (After Driving): Material		Thickness (mm)		Area (mm ²)	
Pile Cap Mass (kg)					
Height Of Fall (m)	Energy Delivered To Pile (E) (J)	Blows Per 0.3 m Of Penetration (N)	Total Penetration (m)	Bearing (Ru) (kN)	

REMARKS

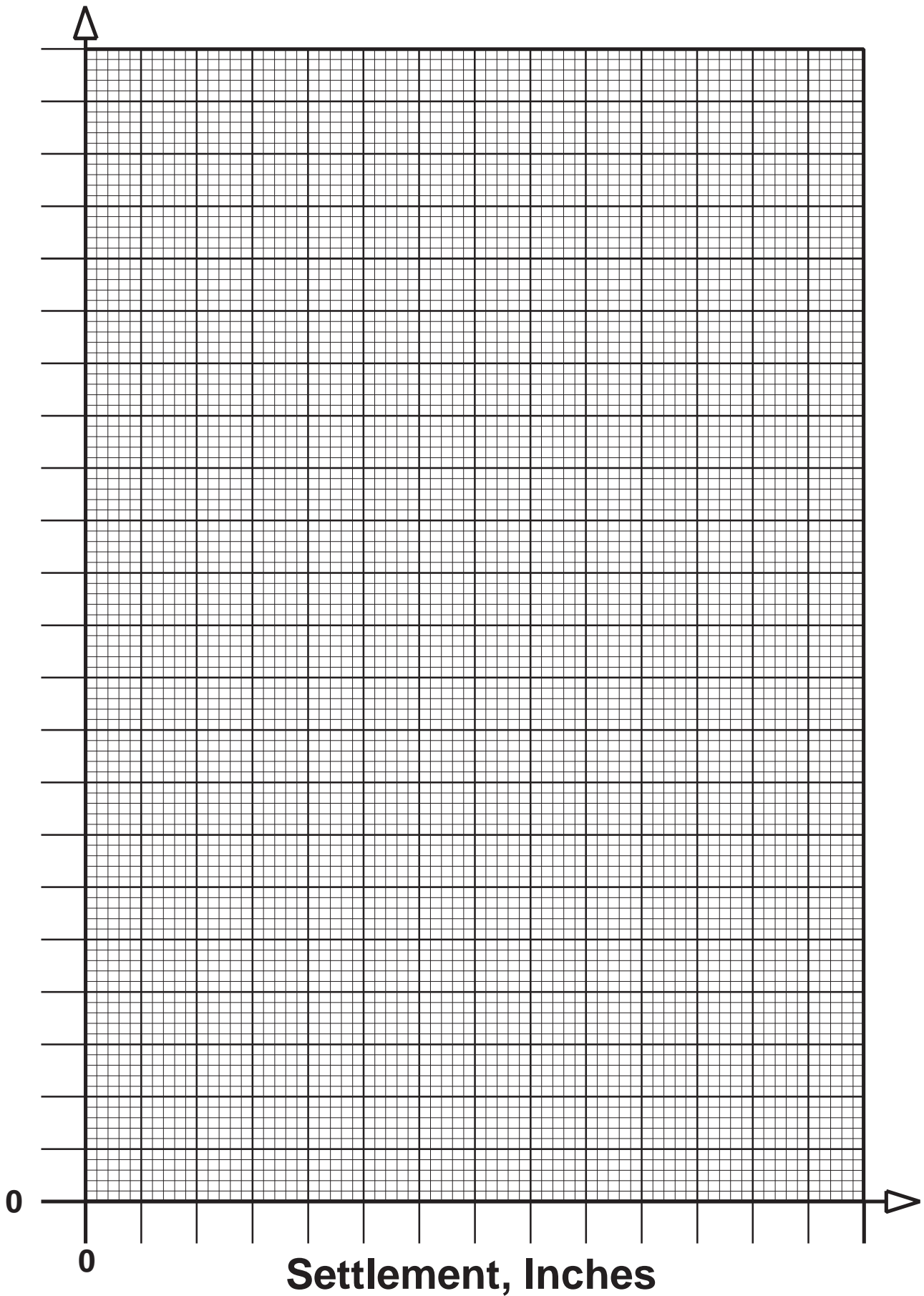
- When using open type and gravity hammers, record mass of hammer and height of fall of hammer. Show rated energy when using closed type hammers.
- Energy delivered to pile should be maintained practically constant once record keeping has begun unless specified otherwise by the Engineer.
- Pile cushion is only required with concrete piling.
- Pile cushion thickness after driving must be at least one-half the original thickness.
- The bearing should be determined from the graph of Blows/0.3 m versus Bearing which is provided from the Wave Equation Analysis or Dynamic Formula of the driving system. If a graph is not provided, refer to Item 505.03(b)2. of the specifications to estimate the bearing capacity using the Dynamic Formula.
- Driving should be continuous. Note any interruptions exceeding one hour.
- Draw sketch on back of this sheet showing location of test pile.
- For continuation of test pile record, use Form C-15A-2.
- Test pile (check one): Static Load Tested ____ Dynamic Load Tested ____ (if static load tested, load test report shall be attached to this report).

Correct _____ Approved _____

Project Manager

Area Operations Engineer

Applied Load, Tons



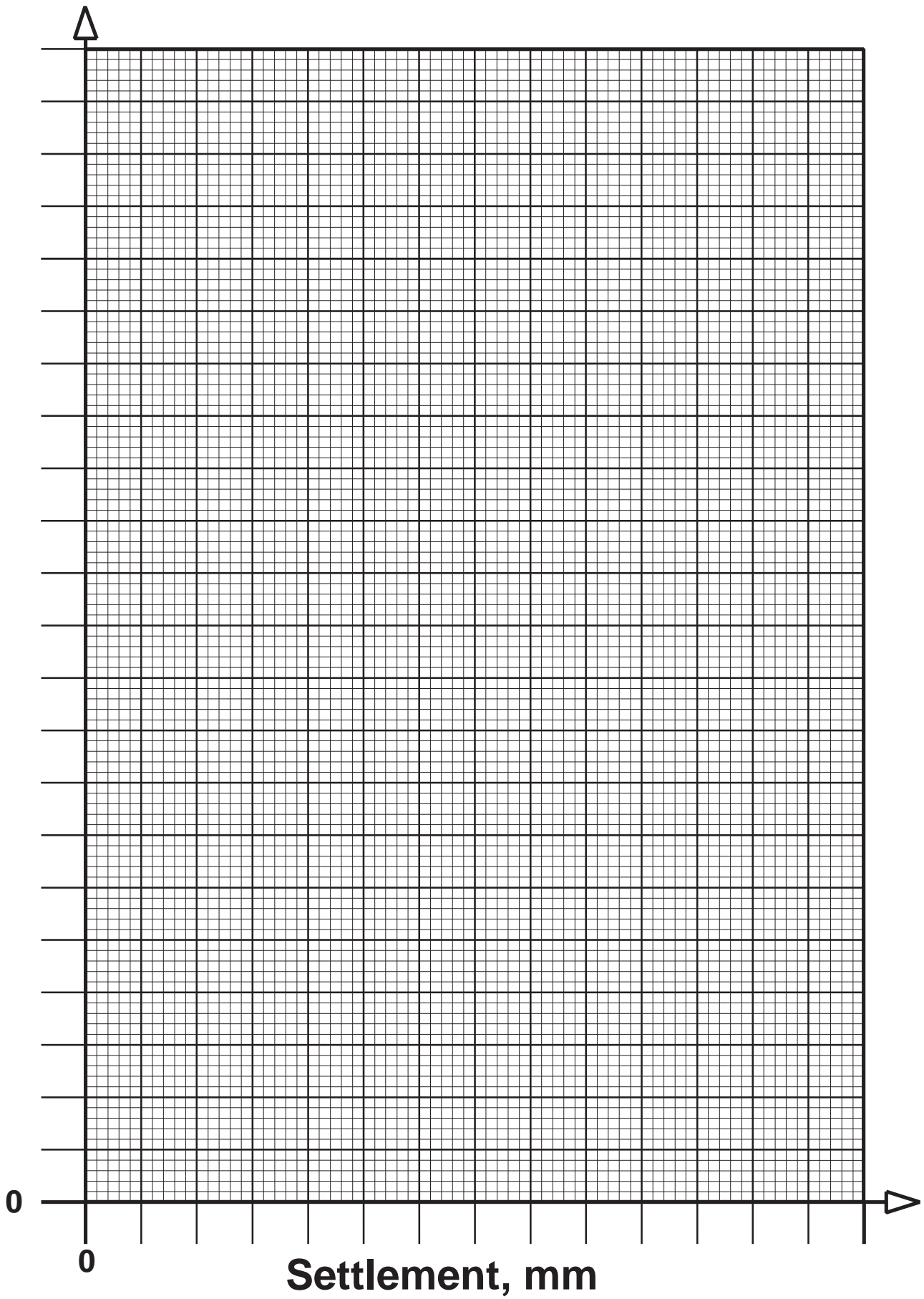
0

0

Settlement, Inches

Pile Load Test, Settlement vs Load

Applied Load, kN



Settlement, mm

Pile Load Test, Settlement vs Load

ALABAMA DEPARTMENT OF TRANSPORTATION PROPOSED PILE LENGTHS

TEST PILE DATA *TO BE COMPLETED BY PROJECT ENGINEER*

Project Number		County	Area
Bridge Station	To Station	Bridge Identification Number	
Road Between		and	
Contractor		Inspector	
Date	Bent No. & Lane	Pile No.	Kind of Soil
Kind of Pile	Size of Pile	Length in Structure	
Cut Off Elevation at Top of Pile		Tip Elevation	

FURNISHED PILE LENGTHS *TO BE COMPLETED BY CONTRACTOR'S REPRESENTATIVE*

Based on data of the test pile driven in above bent, it is proposed to furnish pile lengths for bents as listed below:

BENT NUMBER	FOOTING	PILE NUMBER	PROPOSED LENGTHS

Date: _____

Signed: _____
Contractor's Representative

The above proposed pile lengths have been reviewed by me and in my opinion are sufficient for proposed lengths based on the test pile driven at the above location. Actual lengths of individual piles will be determined by the Engineer or Inspector during driving operations.

Date: _____

Signed: _____
Project Manager

Signed: _____
Area Operations Engineer

cc: Contractor
Area Office
District Office
Project Office

**ALABAMA DEPARTMENT OF TRANSPORTATION
MATERIAL PIT RELEASE**

STATE OF ALABAMA
COUNTY OF _____

Project No.: _____

County: _____

I, (We) _____ hereby certify to the following in connection with the removal of _____ from material pit(s) located on my (our) land in _____ County, Alabama, and used on the above numbered project.

1. That I (we) have received payment in full from _____, Contractor on the project, for _____ cubic yards of _____ @ \$ _____ per cubic yard.
2. That the material pit(s) has (have) been satisfactorily cleared of all debris, properly drained and surplus material leveled.
3. That I (we) hereby release _____, (Contractor) the Alabama Department of Transportation, and _____ County from all liability of any nature, either present or consequential in connection with the removal of _____ from my (our) property.

IN WITNESS whereof I (we) have hereunto set my (our) hand and seal this the _____ day of _____, 20____.

WITNESSES:

OWNER(S):

ALABAMA DEPARTMENT OF TRANSPORTATION

TIME EXTENSION REQUEST

Working Day or Calendar Day Projects

Project No.: _____ County: _____

Contractor: _____

Contract status shown below is from time statement for period ending: _____

CURRENT STATUS		REMARKS	
Original Contract	Working/Calendar Days in Contract:		
	Original Estimated Completion Date:		
Previously Approved Extensions	Additional Working/Calendar Days:		
	Estimated Completion Date:		
	Number Working/Calendar Days Used:		
	% Working/Calendar Days Used:		
	% Project Complete:		

REASON NUMBER	REASON FOR REQUESTED EXTENSION	EXTENSION REQUESTED BY CONTRACTOR (DAYS)	EXTENSION APPROVED BY REGION (DAYS)
Total:			

STATUS WITH APPROVAL OF RECOMMENDED TIME EXTENSION		REMARKS
Revised Estimated Completion Date:		
Total Working/Calendar Days Allowed:		
Revised % Working/Calendar Days Used:		

Region Engineer, ALDOT
Approved

Date

Division Administrator, FHWA
Approved for Federal Participation

Date

**ALABAMA DEPARTMENT OF TRANSPORTATION
TIME EXTENSION REQUEST
For Calendar Date Projects**

Project No.: _____ County: _____
Contractor: _____

Contract status shown below is from time statement for period ending: _____

CURRENT STATUS		REMARKS	
Original Contract	Calendar Start Date:		
	Calendar Completion Date:		
	Calendar Days Allowed:		
Previously Approved Extensions	Additional Calendar Days:		
	Revised Calendar Completion Date:		
	Number Calendar Days Used:		
	% Calendar Days Used:		
	% Project Complete:		

Reason Number	Reason for Requested Extension	Extension Requested by Contractor (Days/Date)	Extension Recommended by Region (Days/Date)	Extension Approved by Const Bureau (Days/Date)
Total:				

STATUS WITH APPROVAL OF RECOMMENDED TIME EXTENSION	REMARKS
New Calendar Completion Date:	
Total Equivalent Calendar Days Allowed:	
Revised % Calendar Days Used:	

Region Engineer, ALDOT
Recommended for Approval

Date

Construction Engineer, ALDOT
Approved

Date

Division Administrator, FHWA
Approved for Federal Participation

Date

Alabama Department of Transportation

Affidavit for Payment of Debts Incurred on Construction Projects

Project No. _____

County _____

Contractor _____

Description and Location of Project _____

This is to certify that all known debts for labor and materials used on the project and all approved sub-contractual obligations associated with the construction of Project _____, _____ County, have been paid or will be paid within 5 days after final payment.

Sworn to me this the _____ day of _____, _____ .
(month) (year)

(Name)

(Title)

(Contractor)

Sworn to and subscribed before me the _____ day of _____, _____ .
(month) (year)

(Notary Public)

For _____ **County** _____ **State**

My commission expires _____
(date)

**ALABAMA DEPARTMENT OF TRANSPORTATION
WEEKLY REPORT OF RAILWAY INSPECTION AND/OR FLAGGING**

Project No.: _____ Date: _____
 County: _____ Area: _____

INSPECTION BY RAILWAY			
Name of Inspector		Date(s) of Inspection	
Residence		Base Location	
Explain Need For Railway Inspector			
Time of Inspection	Begin	End	Total Hours

FLAGGING BY RAILWAY			
Name of Flagman		Date(s) of Flagging	
Residence		Base Location	
Time of Inspection	Begin	End	Total Hours

FLAGGING BY RAILWAY			
Name of Flagman		Date(s) of Flagging	
Residence		Base Location	
Time of Inspection	Begin	End	Total Hours

REASON FOR NEED OF FLAGGING SERVICE (ALDOT REIMBURSEMENT)
<input type="checkbox"/> Working Within Specified Track Clearance <input type="checkbox"/> Working Over Tracks <input type="checkbox"/> Work Likely to Disturb Surface and Alignment of Tracks <input type="checkbox"/> Other Work Within Railway R.O.W. <input type="checkbox"/> Other:

REASON FOR NEED OF FLAGGING SERVICE (CONTRACTOR REIMBURSEMENT)*
<input type="checkbox"/> Transporting Materials and/or Equipment Across Temporary Grade Crossing <input type="checkbox"/> Other:

DESCRIPTION OF CONTRACTOR'S OPERATIONS WITHIN VICINITY OF RAILWAY

SIGNATURES:

_____ ALDOT Representative

_____ Railway Inspector

_____ Railway Flagger

_____ Railway Flagger

_____ Contractor's Representative *

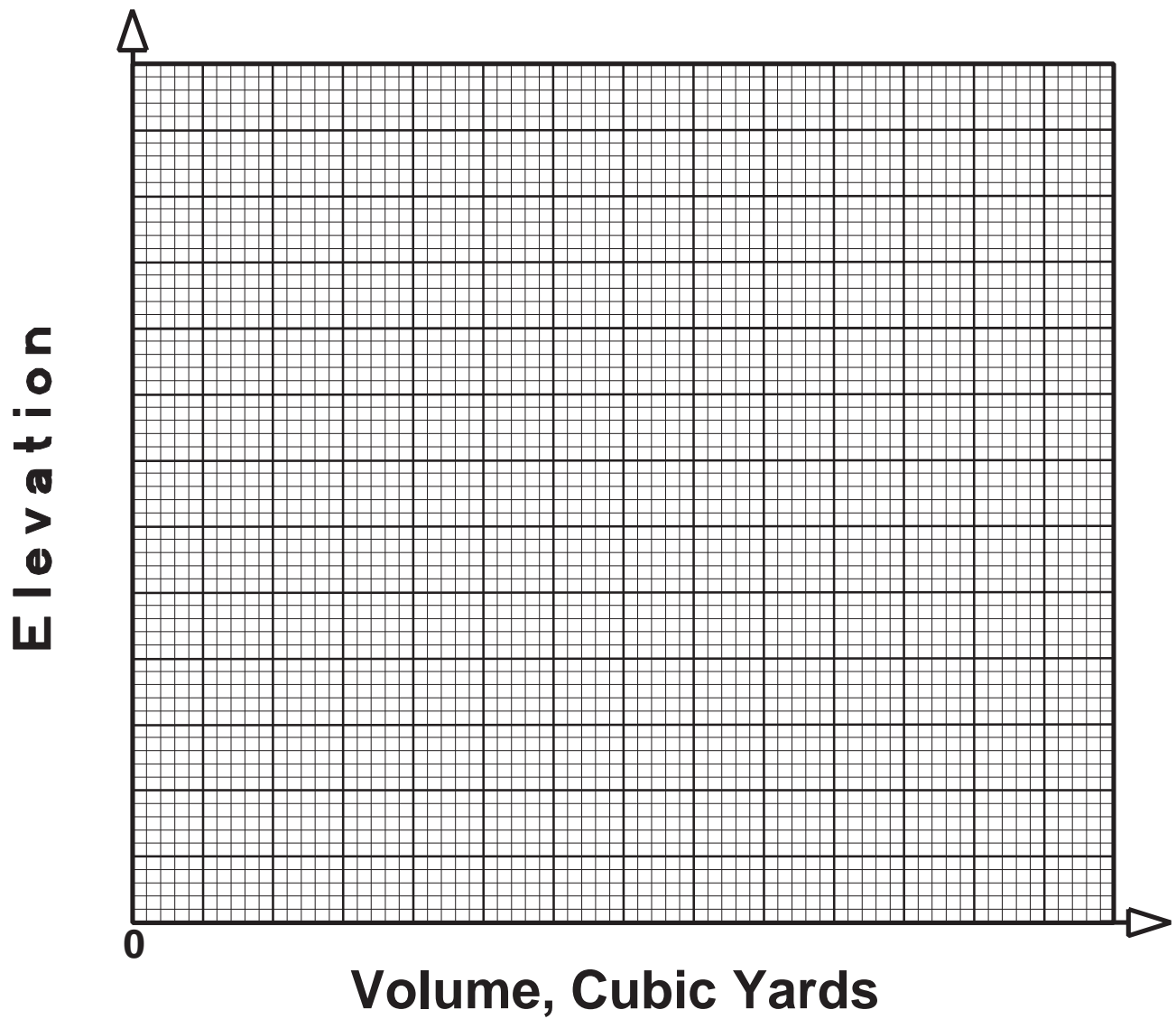
* (Required only if reimbursement must be made by the contractor to the railway company.)

Alabama Department of Transportation CRASH REPORT

Project Information			
Date		Project /Contract ID	
Area		Contractor	
District		Project Description	
County		Location	
Crash Information			
Date of Crash		Time of Crash	
Weather Condition		Road Condition	
Location of Crash (Use Mile Post Reference if Possible)			
Description of Traffic Control in place (lane closures, haul road crossing, etc.) List Typical Application (TA #) from MUTCD, Part 6 if applicable.			
Phase of Sequence of Construction in Use at Time of Crash, if Applicable			
Type of Work Being Performed in Crash Area, if Applicable			
Injuries or Fatalities			
Vehicles (Type), Equipment, etc. Involved			
Description of Crash (List names of witnesses, investigating officer, and other pertinent data)			

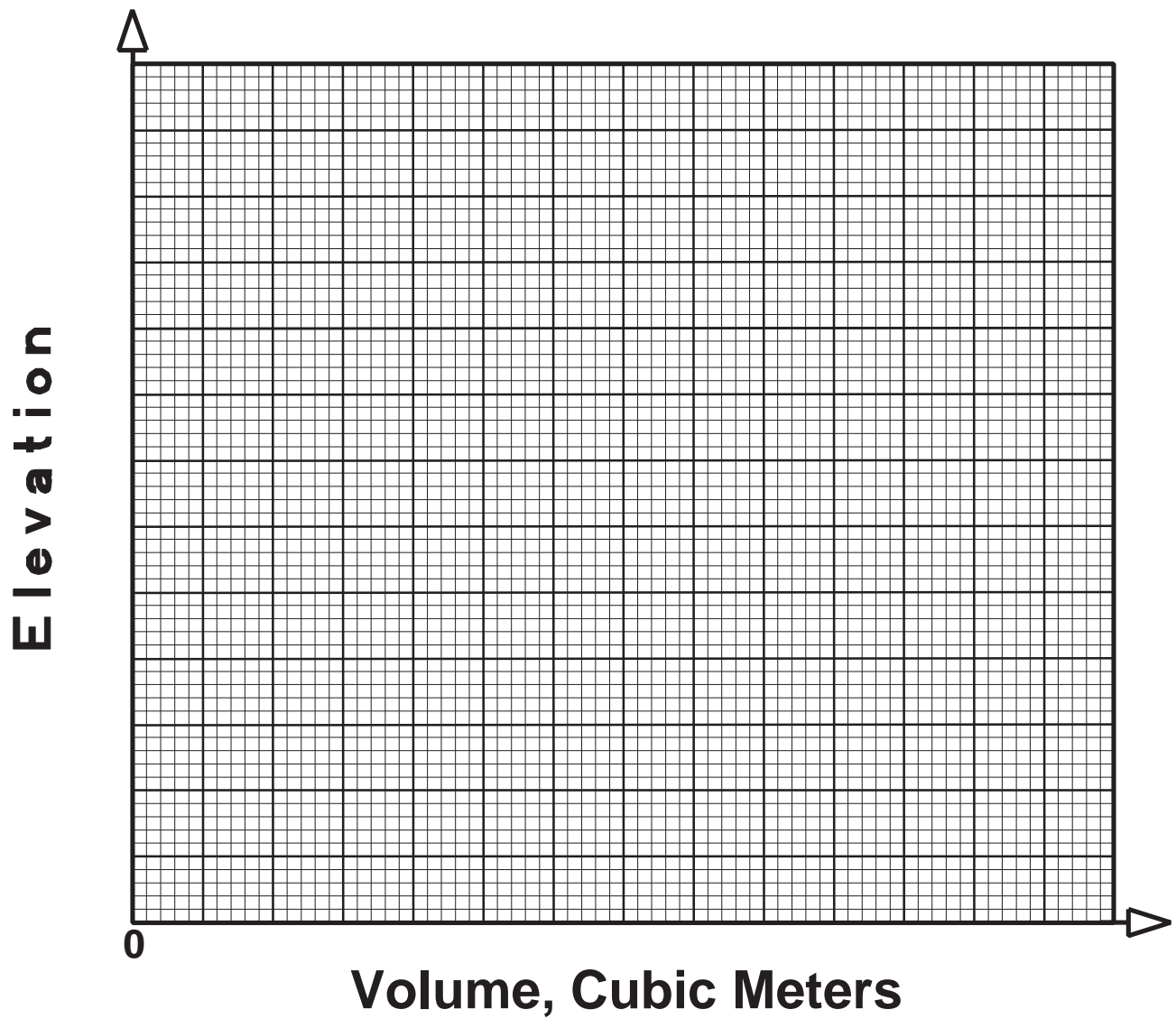
pc: District
Area
File

Signature of Project Traffic Control Inspector



OBSERVATIONS:

LOCATION OF SHAFT:



OBSERVATIONS:

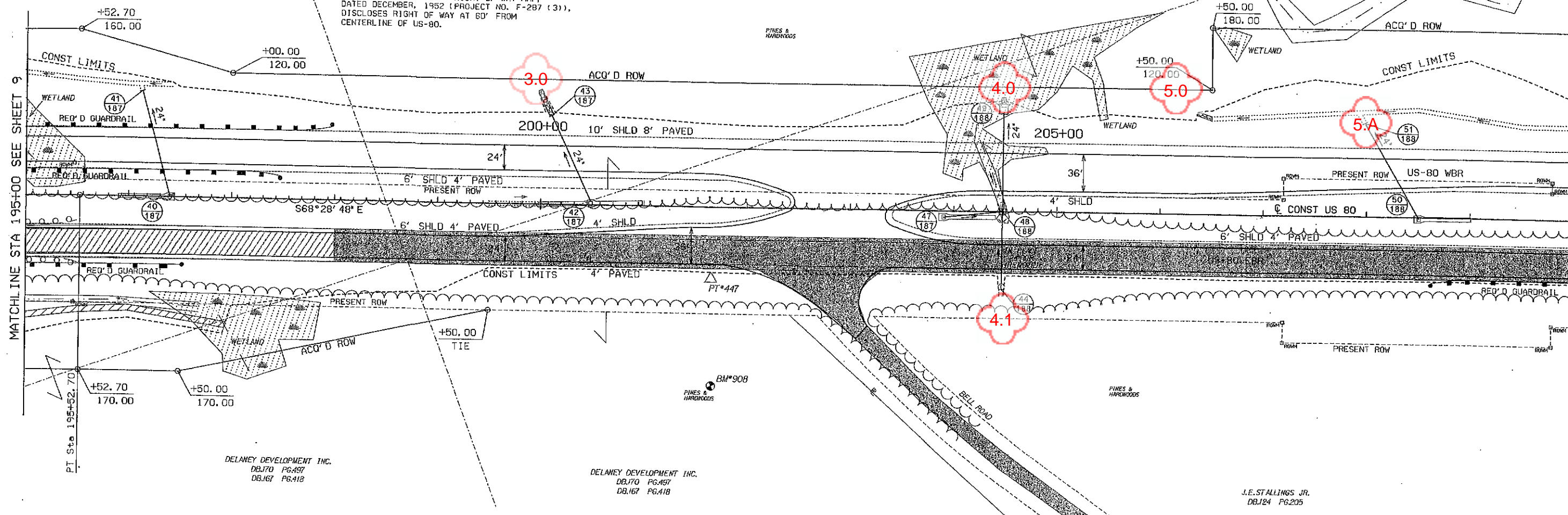
LOCATION OF SHAFT:

DELANEY DEVELOPMENT INC.
DB.170 PG.497
DB.167 PG.418

US-80
PI = Sta 189+41.63
T = 616.70'
E = 32.70'
R = 5780.00'
D = 0°59'29"
Delta = 12°09'39"
e = 3.20%

DELANEY DEVELOPMENT INC.
DB.170 PG.497
DB.167 PG.418

DISCREPANCY NOTE:
RIGHT OF WAY MONUMENT LOCATED AT 75' FROM
CENTERLINE OF US-80. RIGHT OF WAY MAP,
DATED DECEMBER, 1962 (PROJECT NO. F-287 (3)),
DISCLOSES RIGHT OF WAY AT 60' FROM
CENTERLINE OF US-80.



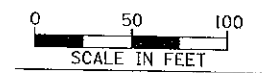
IN PLACE PAVEMENT (RETAIN)
IN PLACE PAVEMENT (REMOVE)

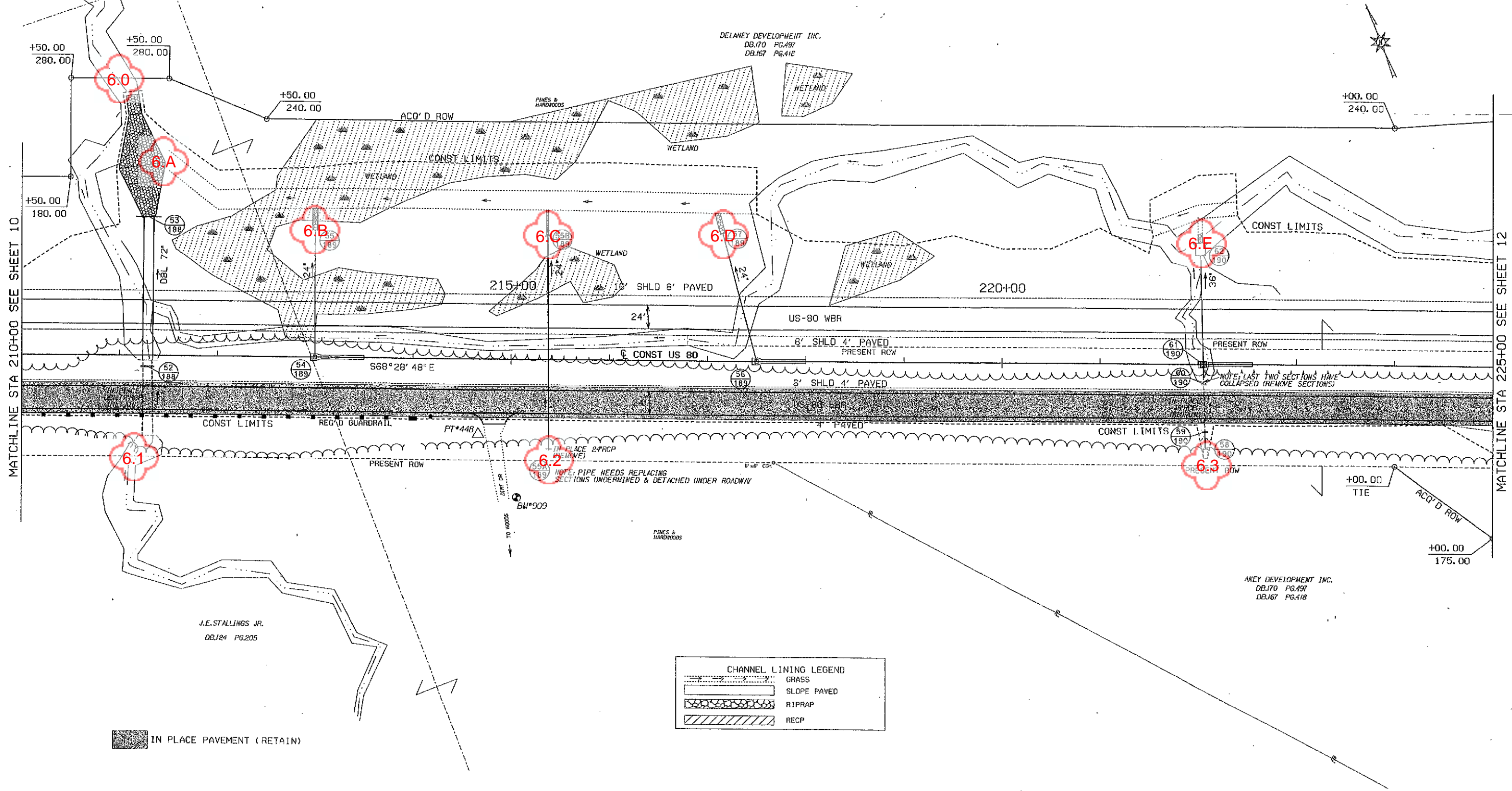
CHANNEL LINING LEGEND	
[Symbol]	GRASS
[Symbol]	SLOPE PAVED
[Symbol]	RIPRAP
[Symbol]	RECP

3.0 4.0 5.0 PRIMARY STORMWATER DISCHARGE POINTS

4.1 BACKGROUND POINT

5.A SECONDARY STORMWATER DISCHARGE POINT (Only label if discharging to a Water of the State)





IN PLACE PAVEMENT (RETAIN)

CHANNEL LINING LEGEND	
	GRASS
	SLOPE PAVED
	RIPRAP
	RECP

6.0 PRIMARY STORMWATER DISCHARGE POINT

6.1 6.2 6.3 BACKGROUND POINTS

6.A 6.B 6.C 6.D 6.E SECONDARY STORMWATER DISCHARGE POINTS (Only label if discharging to a Water of the State)

