

**INSPECTORS DAILY TEST
 FOR IN-PLACE DENSITY
 MOISTURE CONTROL STRIP
 METHOD/NUCLEAR PROBE**

LBSCopies
 Division Engineer
 Project Engineer
 File

Project Number: _____
 County: _____
 Report Number: _____
 Date: _____

Equipment Manufacturer: _____
 Type Transmission Direct _____ Back-Scatter _____ Other _____

Density Probe			Moisture Probe		
Energy Source			Energy Source		
Model Number			Model Number		
Serial Number			Serial Number		
Mfg's Std Count			Mfg's Std Count		
Check Counts					
Count	AM	PM	Count	AM	PM
1			1		
2			2		
3			3		
4			4		
5			5		
Average			Average		
Project Location:			Contractor:		
Specification:		Control Strip No.:	Layer Tested:		Date Placed:
Roadway:	2 Lane	Multi-lane	Roadway Shoulder:	Right	Left
Test Section No.:		Begin Station:		End Station:	
Control Strip Density lbs/ft. ³ (kg/m ³)			Wet		Dry
% Soil Dry Basis:			Control Strip Moisture:		
Average Density:		% of Required Density:	Average Moisture:		% of Required Moisture:
Test Section:			Passes:		Fails:
Individual Test Sites					
	1	2	3	4	5
Station of Test					
Location of Test					
Density Probe Count					
Density Count Ratio					
Wet Density lbs./ft. ³ (kg/m ³)					
Dry Density lbs./ft. ³ (kg/m ³)					
Moisture Probe Count					
Moisture Count Ratio					
Moisture lbs./ft. ³ (kg/m ³)					
% Moisture (Soil Dry Basis)					

Remarks: _____

 Inspector

 Project Engineer