GENERAL TEST REPORT (VISUAL INSPECTION)

Project Number: ____________
County: ____________________
Division: __________________
Date: _____________________

Visual Inspection Report of: __________________ Date Received: __________________
Producer: ___________________ Date Received: __________________
Identification Marks: __________________
Source of Material: __________________
Quantity (Represented): __________________
Inspected by: ___________________ Date: ___________________

Summary of Visual Inspection

This material has been visually inspected and is in reasonable close conformance with the Alabama Department of Transportation Standard Specifications for: ________________________________

This material is accepted / is not accepted for use, based on visual inspection.

____________________________________
Project Engineer /Manager