

**RHODE ISLAND DEPARTMENT OF TRANSPORTATION  
MATERIALS AND QUALITY ASSURANCE**

Office \_\_\_\_\_  
Resident: \_\_\_\_\_

**RETROREFLECTIVITY OF CONTINUOUSLY WET PAVEMENT MARKINGS (ASTM E2832)**

Item No: _____	Date: _____
RI Contract No: _____	F.A.P. No: _____
Roadway Name: _____	Length: _____
Roadway Limits: _____	

Acceptance     Independent     Info Only     P. Engineering

Stripe Color:            White            Yellow            Contractor: \_\_\_\_\_

Date Applied: \_\_\_\_\_            # of Days: \_\_\_\_\_

Meter S/N: \_\_\_\_\_            ID Code: \_\_\_\_\_

Calibrated Initially:    Yes    No    Verified after reading / ID number(s): \_\_\_\_\_

Ambient Temperature: \_\_\_\_\_            Wetting Rate (in./h): \_\_\_\_\_            **Spec: 2.0 ± 0.2**

Grade: \_\_\_\_\_            **Spec: > 0.5 %**

Cross Slope: \_\_\_\_\_            **Spec: > 0.5 %**

<u>Wet Box:</u>	<u>Calibrated:</u>
Rain Maker <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
3M <input type="checkbox"/>	
Other <input type="checkbox"/>	

**Retroreflectometer Readings**

Start Near (loc / spacing): \_\_\_\_\_

Steady State Measurements: \_\_\_\_\_

**Measurements:**

1		2		3		4	
<b>Spec: @ 30 - 90 Days</b>				<b>W: 250</b>		<b>Y: 200</b>	
							Average: _____

Meets Spec             Does Not Meet Spec             Not Applicable

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Technician(s) \_\_\_\_\_ Date \_\_\_\_\_  
(Print / Sign)

Reviewed By \_\_\_\_\_ Date \_\_\_\_\_  
(Print / Sign)