

Materials Lab No: \_\_\_\_\_ (Lab use only)

**RHODE ISLAND DEPARTMENT OF TRANSPORTATION  
MATERIALS MANAGEMENT  
CORE REQUEST FORM**

RI Contract No: \_\_\_\_\_ F.A.P. No: \_\_\_\_\_  
Project Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Project Limits: \_\_\_\_\_ Project Town/City: \_\_\_\_\_

**I. Project Details**

i. Type of cores HMA  Concrete   
ii. Project Length: \_\_\_\_\_ miles  
iii. Number of Travel Lanes: \_\_\_\_\_ iv. Lane Width: \_\_\_\_\_ feet  
v. Include Shoulders: Yes  No  vi. Shoulder Width: \_\_\_\_\_ feet  
vii. Location of cores Marked Plans  Random Method

**II. Explanation**

i. Reason for Request: (Please Check)  
Prelim. Eng.  Density  Final  Other

Describe: \_\_\_\_\_  
\_\_\_\_\_

ii. Indicate Pavement Structure:  
Explain pavement structure, if known, and indicate layer(s) to be tested.

\_\_\_\_\_

iii. Indicate Quantity and Size of Cores: Number: \_\_\_\_\_ Diameter: \_\_\_\_\_  
(Cores are 4" unless otherwise specified)

iv. Instructions or Special Notes:  
Explain testing/analysis to be performed (i.e. bulk specific gravity, pictures, gravel analysis, etc.)

\_\_\_\_\_

**III. Sample Disposition**

i. After Testing: Keep Samples  Dispose of Samples

Results Issued/Returned To:

Are there known environmental hazards on or near the project site? Yes  No   
If yes, please identify the nature of the hazards on a separate sheet. Please provide a health and safety plan for working in the area, if available.

**NOTE: Under no circumstances will a core request be processed unless this information is provided. With this information, it will be determined whether Materials personnel can safely collect and test samples.**

Requested By (Print / Sign) Section Date

Reviewed By (Materials Engineer) (Print / Sign) Date