

**RHODE ISLAND DEPARTMENT OF TRANSPORTATION
MATERIALS MANAGEMENT**

Office _____
Resident: _____

RETROREFLECTIVITY OF CONTINUOUSLY WET PAVEMENT MARKINGS (ASTM E2832)

Item No: _____	Date: _____
RI Contract No: _____	PTSID: _____ F.A.P. No: _____
Roadway Name/Town: _____	Length Tested (LF): _____
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
Spec: @ 30 - 90 Days			W: 250
		Y: 200	Average: _____

Meets Spec Does Not Meet Spec Info Only

Remarks: _____

Technician(s) _____ Date _____ Reviewed By _____ Date _____
(Print / Sign) (Print / Sign) (Print / Sign)