

Today's Date

0

NOTES:

Completed By

 Please complete one RSAR form for EACH State Highway and/or each segment with a different type of treatment that is include in your project.
Required fields are indicated with a (*)

Project Description

Project #	Project Description	
*		
Subacct/Patrol #		
Highway#		
Prime Contractor		
*		
Region		
Maintenance Project?		
Yes		
Area of Surface Treatn	hont	
Area of Surface Treatil		
Beginning MilePoint	Surface Treatment (example: as	phalt overlay, mill & fill, concrete slab repair, etc.)
	(If greater than 500 Feet in le	ngth)
Ending MilePoint	·	×
	Direction (increasing milenest dec	creasing milepost, or both directions.)
Work End Date	chiection (increasing mieposi, dec	
Project Details		
Treatment Thickness (inches)	Average Project Width(feet)	Pavement Type
		✓
		* (asphalt, concrete, asphalt over
		concrete, concrete over asphalt.
General		
Comments		

Please contact your Regional Materials Engineer or Regional Pavement Manager with any questions or comments you may have regarding this form.

The RSAR for projects utilizing LIMS/SiteManager must use LIMS/SiteManager to generate the form. Forms filled in manually will not be accepted for LIMS/SiteManager projects.

Phone Number