

**PRE-APPROVED PRODUCT EVALUATION REQUEST & SUMMARY**

Materials Laboratory  
Colorado Department of Transportation  
4201 East Arkansas Avenue  
Denver, Colorado 80222

PART 1: Completed by Product Representative  
PART 2: Completed by CDOT Product Evaluation Coordinator  
PART 3: Completed by CDOT Expert Product Evaluator  
PART 4: Completed by CDOT Materials Engineer

**PART 1**

Product name:		Product category:	
Product representative (name & address):		Manufacturer (name & address):	
Phone:	FAX:	Phone:	FAX:
<b>Description of product</b> , (be precise, include product differentiation between your products &/or competitor's products):			
<b>Usage of product</b> , (be specific to CDOT highway activities only):			
<b>Benefits to CDOT</b> , (how will your product enhance quality, improve safety, save money, be a better value then other manufacturer's products):			
<b>Specifications</b> , (identify specifically those applicable) & <b>Certificate of Compliance</b> (submittal required):			
<input type="checkbox"/> CDOT : <input type="checkbox"/> ASTM : <input type="checkbox"/> AASHTO: <input type="checkbox"/> FHWA : <input type="checkbox"/> other :			
<b>Product testing</b> , (national/independent laboratories) & <b>Certified Test Report</b> (submittal required):			
<input type="checkbox"/> NTPEP-AASHTO: <input type="checkbox"/> HITEC or FHWA : <input type="checkbox"/> FHWA or other : <input type="checkbox"/> other :			
<b>State DOT Approvals</b> , (current documentation required):			
<b>Evaluation Procedure</b> , (recommended):			
Sample submitted: <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a		Materials Safety Data Sheets (MSDS): <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> n/a	
Notes/Additional Comments			
Manufacturer's Web-site address:			Submit > <input type="text"/>