

PRE-APPROVED PRODUCT EVALUATION REQUEST & SUMMARY

Product Evaluation Coordinator
 Colorado Department of Transportation
 4670 North Holly Street, Unit A
 Denver, Colorado 80216

Material code:

Material code description full name:

FOR INTERNAL CDOT USE

PART 1

Product name:		Product category:	
Product representative (name & address): Attn:		Manufacturer (name & address): Attn:	
Phone:	FAX:	Phone:	FAX:
Web-site address:		Web-site address:	
Description of the product: (Include specific quantifiable details from tech data sheet. Advertising generalities are not appropriate.)			
Restrictions, (installation and/or use):			
Use of the product, (be specific to CDOT highway activities only):			
Benefits to CDOT, (how will your product enhance quality, improve safety, save money, be a better value than other manufacturer's products):			
Specifications, (listing those applicable is required) & Certificate of Compliance (required to certify compliance with listed specifications): <input type="checkbox"/> CDOT : <input type="checkbox"/> ASTM : <input type="checkbox"/> AASHTO: <input type="checkbox"/> FHWA : <input type="checkbox"/> other :			
Product testing, (from national/independent laboratories or universities) & Certified Test Report (CTR required to validate all claims): <input type="checkbox"/> NTPEP-AASHTO: <input type="checkbox"/> FHWA : <input type="checkbox"/> other : <input type="checkbox"/> other :			
State DOT Approvals, (current documentation required):			
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			