

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:

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):

- ☐ CDOT :
☐ ASTM :
☐ AASHTO:
☐ FHWA :
☐ other :

Product testing, (from national/independent laboratories or universities) **& Certified Test Report** (CTR required to validate all claims):

- ☐ NTPEP-AASHTO :
☐ FHWA :
☐ other :
☐ other :

State DOT Approvals, (current documentation required):

Sample submitted: ☐ yes ☐ no ☐ n/a Materials Safety Data Sheets (MSDS): ☐ yes ☐ no ☐ n/a

Notes/Additional Comments