

# HIGHWAY CONDITION REPORT

Information requested by Michigan Department of Transportation on a voluntary basis  
Complete and return to appropriate MDOT Region Office

DISTRIBUTION:  
Original - MDOT Region  
Maintenance Engineer  
Copy - Originating Area/County

REGION		COUNTY		DATE SUBMITTED
LOCATION		ROAD CONDITION	ACTION	CONDITION CODE
ROUTE SECTION	DEFINED LOCATION	DETAILED DESCRIPTION - Enter a response for each item.	DATE	
		1. SURFACE <input type="checkbox"/> 2. SHOULDER <input type="checkbox"/> 3. MISC. <input type="checkbox"/> <input type="checkbox"/>	DATE NOTED:	1. SURFACE (a) Safe condition (b) Blowups (c) Holes (d) Longitudinal joints (e) Frost heaves (f) Settlements  2. SHOULDER (a) Safe condition (b) Low (c) Holes (d) Eroded  3. MISCELLANEOUS (a) Safe condition (b) Obstructed vision - overhanging branches or brush (c) Loose gravel on paved intersection (d) Defective curbs (pedestrian traffic) (e) Railroad grade crossings (f) Defective signals and signs (g) Other (describe)
		SPECIFIC CONDITION & CORRECTION REQUIRED.	DATE REPAIRED:	
		1. SURFACE <input type="checkbox"/> 2. SHOULDER <input type="checkbox"/> 3. MISC. <input type="checkbox"/> <input type="checkbox"/>	DATE NOTED:	
		SPECIFIC CONDITION & CORRECTION REQUIRED.	DATE REPAIRED:	
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		SPECIFIC CONDITION & CORRECTION REQUIRED.	DATE REPAIRED:	

REMARKS

INSPECTED BY - SIGNATURE	TITLE	DATE
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