Michigan Department of Transportation 1178 (05/2023)

FILE 302 TRANSFER OF TESTED MATERIALS REPORT

DISTRIBUTION: Region (each Region if transfer is from one Region to another), Project Files

TO:	CONTROL SECTION I.D.	JOB NUMBER		RESIDENT/PROJECT	ΓENGINEER	
10:						
FROM:		JOB NUMBER		RESIDENT/PROJECT	Γ ENGINEER	
NAME and	I SPECIFICATION OF MATERIAL	-				
NAME OF	PRODUCER or SUPPLIER					
PIT or SO	URCE (Aggregates)					
LOCATION	N OF MATERIAL					
QUANTIT	Y OF MATERIAL TRANSFERRED					
QUANTIT	Y REMAINING IN INVENTORY					
	EVIDENCE OF T	EST				
REPORT TITLE			REPORT NUMBER	LABORATORY NUMBER	DATES	QUANTITY TESTED
IDENTIFIC	NATION OF MATERIAL (L.4 P. 4)	Oct Month on 5to				
IDENTIFIC	CATION OF MATERIAL (Lot, Batch	, Seal Number, Etc.)				
REMARKS	3					
NAME				[DATE	