

**NORTH CAROLINA DEPARTMENT OF TRANSPORTATION**  
**ASPHALT QUALITY ASSURANCE / QUALITY CONTROL TEST WORKSHEET**

**MAXIMUM SPECIFIC GRAVITY**  
**(RICE TEST)**

TYPE MIX: \_\_\_\_\_ JMF NO. \_\_\_\_\_ DATE: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ QC SAMPLE NO. \_\_\_\_\_ QC SAMPLE DATE: \_\_\_\_\_

PLANT LOCATION: \_\_\_\_\_ PLANT CERT. NO. \_\_\_\_\_ JMF MAX. SP. GR. \_\_\_\_\_

A. WEIGHT OF CONTAINER	
B. WEIGHT OF CONTAINER + MIX	
C. WEIGHT OF CONTAINER + MIX + WATER (UNSUSPENDED) OR WEIGHT OF CONTAINER + MIX IN WATER (SUSPENDED)	
D. WEIGHT OF CONTAINER + WATER (UNSUSPENDED) OR WEIGHT OF CONTAINER IN WATER (SUSPENDED)	
E. $\text{UNCORRECTED MAX. SP. GR.} = \frac{B - A}{(B - A) - (C - D)} =$	

**DRY BACK:**

WEIGHING INTERVAL	TIME	WEIGHT OF PAN + SAMPLE
0 MIN.		
15 MIN.		
30 MIN.		
45 MIN.		
60 MIN.		
75 MIN.		
90 MIN.		
105 MIN.		
120 MIN.		

F. WEIGHT OF PAN + FINAL SAMPLE WEIGHT	
G. WEIGHT OF PAN	
H. $\text{MAX. SP. GR.} = \frac{B - A}{(F - G) - (C - D)}$	
I. DRY BACK CORRECTION FACTOR =	
J. $(E) - (I) =$ CORRECTED MSG	
K. REHEAT CORRECTION FACTOR =	
L. $(H) \times (K) =$ CORRECTED MSG	

\* PRINT QA/QC TECHNICIAN NAME & HICAMS#: \_\_\_\_\_

\* QA/QC TECHNICIAN SIGNATURE: \_\_\_\_\_

\* BY PROVIDING THIS DATA UNDER MY SIGNATURE AND/OR HICAMS NUMBER, I ATTEST TO THE ACCURACY AND VALIDITY OF THE DATA ON THIS FORM AND CERTIFY THAT NO DELIBERATE MISREPRESENTATION OF TEST RESULTS, IN ANY MANNER, HAS OCCURRED.

NOTE: THIS FORM TO BE MAINTAINED  
IN QA/QC FILES.