

North Carolina Department of Transportation  
Materials and Tests Unit  
Research & Investigations Section

**SHAFT INSPECTION REQUEST FORM**

Date Request Made	
<b>DATE and TIME</b> Inspection Requested	
Request By (Name)	
Title	
Telephone Number (Office)	
Telephone Number (Cell)	
Project Contact (Name)	
Project Contact Title	
Project Contact Telephone Number (Office)	
Project Contact Telephone Number (Cell)	
County - Division	
Contract Number	
Number of Shafts to be inspected	
Directions to Meeting Point (Project Location or Office)	
Notes/ Comments	

If you have questions about this form, please contact Hesham El-Boulaki @ (919) 329 4223, or hel-boulaki@dot.state.nc.us