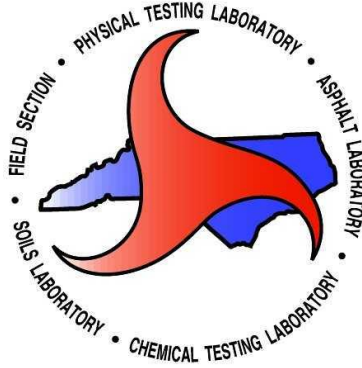


# Materials & Tests Unit



## NCDOT

### CONCRETE AIR METER REQUEST FORM

*RETURN FORM TO M&T DIVISION SMS*

FORM MUST BE COMPLETE AND SIGNED TO PROCESS ORDER

NCDOT UNIT & DIVISION: \_\_\_\_\_

RESIDENT ENGINEER / SUPERVISOR: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_  
(INCLUDE ZIP CODE)

\_\_\_\_\_

PHONE NO: \_\_\_\_\_ FAX NO. \_\_\_\_\_

DEPARTMENT NO. \_\_\_\_\_ COURIER NO. \_\_\_\_\_

QUANTITY  
(LIMIT 3 PER TYPE)

TYPE AIR METER

TYPE B PRESSURE METER (FORNEY TYPE)

VOLUMETRIC METER (ROLL-A-METER)

\_\_\_\_\_  
RESIDENT/SUPERVISOR SIGNATURE

\_\_\_\_\_  
DATE