

**STATE OF MINNESOTA
DEPARTMENT OF TRANSPORTATION**

Date _____
Auth. No. _____
Order No. _____
Maint. Dist. _____

Inspection Report on _____

Report No. _____
S.P. _____
Bridge No. _____
ETA No. _____
Contract No. _____
Invoice or Order No. _____

Supplier _____
Contractor _____
Engineer _____

Location _____
Destination _____
Consignee _____

Specification Designation	Description	Quantity			For Test Results See Laboratory No.	
		Number	Units			
Total						

Rejection and Reasons _____

Remarks _____

To Be Prepared :
 White - For Engineer

Signed _____
 Inspector.