ARIZONA DEPARTMENT OF TRANSPORTATION * MATERIALS GROUP



1221 NORTH 21ST AVENUE PHOENIX, ARIZONA 85009-3740 PHONE (602) 712-7231

POLICY AND PROCEDURE DIRECTIVE

TO: ALL MANUAL HOLDERS	PPD NO. 14a
SUBJECT:	EFFECTIVE DATE:
TESTING AND CERTIFICATION OF BITUMINOUS DISTRIBUTOR TRUCKS	November 5, 2014

1. GENERAL

- 1.1 Prior to the spreading of bituminous material on any ADOT project, bituminous distributor trucks shall have been tested in accordance with Arizona Test Method 411, "Determination of Bituminous Distributor Truck Transverse Spread Rate", and shall have been certified within 12 months prior to the date of spreading in accordance with the requirements of Subsection 404-3.02(A) of the ADOT Specifications.
- 1.2 ADOT Regional Materials Engineers are responsible for the certification of bituminous distributor trucks.
- 1.3 All testing, including the preparation of test pads and test plates, shall be performed by an independent testing laboratory which has been approved by the respective ADOT Regional Materials Engineer. A professional engineer, registered in the State of Arizona and employed by the independent testing laboratory, shall be responsible for all testing and test results.
- 1.4 The distributor truck owner shall be responsible for all costs associated with the testing performed by the independent testing laboratory.
- 1.5 Upon completion of testing, the independent testing laboratory shall issue a letter to the owner of the distributor truck. The letter shall include the following:
- 1.5.1 A statement that the testing was performed in accordance with the requirements of Arizona Test Method 411.
 - 1.5.2 The name and location of the facility where the testing was performed.
 - 1.5.3 The date that the testing was performed.

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- 1.5.4 Identification of the truck for which testing was performed. Such identification shall consist of:
 - 1.5.4.1 Name of the owner of the distributor truck.
 - 1.5.4.2 Truck Number.
 - 1.5.4.3 Truck License Plate Number.
 - 1.5.4.4 Truck Make and VIN Number.
 - 1.5.5 Name of person performing the testing.
- 1.5.6 Name, signature, and seal of the registered professional engineer responsible for the testing and test results. The date shall be recorded as part of the seal.
- 1.5.6.1 An example of a typical letter from the independent testing laboratory to the owner of the distributor truck is shown in **Attachment #1**.
- 1.5.7 A copy of the test results shall be attached to the letter from the independent testing laboratory. The test results shall be sealed, signed, and dated by the engineer responsible for the testing.
 - 1.5.7.1 An example of the test results is shown in **Attachment #2**.
- 1.6 The owner of the distributor truck shall submit the letter from the independent testing laboratory, along with the accompanying test results, to the respective ADOT Regional Materials Engineer.
- 1.6.1 The Regional Materials Engineer shall review the submittal from the owner of the distributor truck for accuracy and completeness. If the submittal is satisfactory, the Regional Materials Engineer will approve the test results.
- 1.6.2 Upon approval of the bituminous distributor truck transverse spread rate test results, the respective ADOT Regional Materials Engineer will issue a completed "Certificate of Test" and a completed "ADOT Bituminous Distributor Truck Certification" sticker to the owner of the distributor truck. Illustrations of a blank Certificate of Test and a blank certification sticker are shown in **Attachment #3** and **Attachment #4**, respectively.

- 1.7 The owner of the distributor truck shall apply the completed certification sticker to the inside of the driver's side door of the truck in a clearly visible location. The Certificate of Test shall be kept in the distributor truck and shall be readily available for review by the Engineer.
- 1.8 Bituminous distributor trucks that do not have a valid and current Certificate of Test and ADOT certification sticker will not be allowed to supply bituminous materials on ADOT projects.
- 1.9 Regardless of certification, the Engineer may at any time require that distributor trucks be tested to determine their acceptability.

Paul T. Burch ____ Paul T. Burch, P.E.

Assistant State Engineer (Acting)

Materials Group

Attachments (4)

Letterhead of Approved Independent Laboratory (Name of Laboratory is shown as "ABC" below)

Month, Day, Year	
First Name, Last Name Title of Position Held Owner of Distributor Truck <i>(Company Name is si</i> Address City, State Zip	hown as "XYZ" below)
RE: Bituminous Distributor Truck Certificat	ion
Dear (),	
As requested and authorized by XYZ Company, bituminous distributor truck which is owned and	ABC laboratory has completed testing on the following operated by XYZ.
Truck Make:	VIN Number:
Truck Number:	License Plate Number:
Testing was performed in accordance with "Determination of Transverse Distributor Spread	n the requirements of Arizona Test Method 411, I Rate".
the testing, the pads were prepared, weigh Method 411. Spray bar application of the bitun from the metal sheets and weighed to determine	name of testing facility) on (Date). Prior to performing ed, and assembled in accordance with Arizona Test ninous material was observed. The pads were removed ne the application rate of the bituminous material. The and Subsection 404-3.02(A) of the ADOT Specifications.
	s report for your information and review. Please submit t results, to the respective ADOT Regional Materials he referenced bituminous distributor truck.
If you have any questions regarding this inform please do not hesitate to contact us.	ation, or if we may be of further assistance in any way
Sincerely,	Reviewed By:(Name)
(Name)	(Title of Position Held)
(Title of Position Held)	
(Signature)	(Sealed, Signed, and Dated)

Attachment

EXAMPLE OF LETTER FROM THE INDEPENDENT TESTING LABORATORY TO THE OWNER OF THE DISTRIBUTOR TRUCK

(Name of Approved Independent Laboratory) TRANSVERSE DISTRIBUTOR TRUCK SPREAD RATE

Arizona Test Method 411

DISTRIBUTOR TRUCK OWNER:			,					TESTED BY:		DATE:			
TRUCK #:			LICENSE PI	ATE #:			VIN #:			SPRAY WIDTH: FT.			
TEST FACIL	JTY:					-	***************************************	*		JOB#:			
TYPE OF BI	TUMINOUS MA	ATERIAL	USED:			TEMP.:		TEST	RESULT:				
PAD#	WT. PAD + BIT. MATL	PAD TARE	WT. BIT. MATL	* SPREAD RATE	PAD OUT	REMARKS	PAD#	WT. PAD + BIT. MATL	PAD TARE	WT. BIT. MATL	* SPREAD RATE	PAD OUT	REMARKS
1		8.9	0.0	0.000		OMIT	26	21.0	8.8	12.3	0.132		
2	21.7	8.8	12.8	0.137			27	20.8	8.9	12.0	0.128		
3	21.9	8.9	13.0	0.139			28	20.6	8.8	11.8	0.126		
4	22.0	8.7	13.3	0.142			29	20.9	8.9	12.1	0.129		
5	22.2	8.8	13.3	0.142			30	21.0	8.8	12.3	0.132		
6	21.9	8.8	13.1	0.140			31	20.3	8.9	11.4	0.122		
7	21.5	8.9	12.7	0.136			32	21.2	8.8	12.4	0.133		
8	21.6	8.8	12.8	0.137			33	21.9	8.8	13.2	0.141		
9	21.0	8.8	12.1	0.129			34	21.6	8.8	12.8	0.137		
10	21.7	8.8	12.9	0.138			35	21.8	8.8	13.0	0.139		
11	22.3	8.9	13.4	0.143			36	21.2	8.8	12.4	0.133		
12	20.5	8.9	11.6	0.124			37	21.1	8.8	12.3	0.132		
13	22.0	8.9	13.1	0.140			38	20.0	8.8	11.2	0.120		
14	21.7	8.9	12.8	0.137			39	20.2	8.9	11.3	0.121		
15	21.1	8.9	12.2	0.131			40	21.9	8.8	13.1	0.140		
16	19.6	8.8	10.9		X		41	21.5	8.8	12.7	0.136		
17	20.9	8.9	12.1	0.129			42	21.8	8.8	13.0	0.139		
18	20.8	8.9	11.9	0.127			43	21.0	8.8	12.2	0.131		
19	20.3	8.9	11.4	0.122			44	21.1	8.8	12.2	0.131		
20	20.9	8.8	12.1	0.129			45	21.7	8.9	12.8	0.137		
21	21.0	8.9	12.2	0.131			46	21.6	8.8	12.8	0.137		
22	20.9	8.8	12.1	0.129			47	22.3	8.8	13.5	0.144		
23	21.2	8.8	12.4	0.133			48	23.0	8.8	14.2	0.152	X	
24	20.7	8.8	11.9				49	21.5	8.8	12.6	0.135		
25	20.7	8.8	11.9				50	19.9	8.9			X	
			* SPREAD R	ATE = GALL	ONS PEI	R SQ. YD.	51		8.8	0.0	0.000		OMIT
AVG. SPREA	ARE:	0.133		D.		TO			E RANG	E: UPPER:	0.146		
REMARKS:	EAD:	0.3	GALS.			SPECIFICATIO	JN LIMITS:				on 404-3.02(. rd.,
Tested By:	Fested By:(Name)			Reviewed By:				(Name)					
(Title of Position Held)						(Title of Position Held)				ld)			
				Vumber)									
			(Signa	uture)									
Testing Fac	cility:			Name)							(Sealed, Sign	ned, Date	ed)
			(4	(ddress)									
			(City	State Zin)									



Certificate of Test

RE: Bituminous Distributor Truck Transverse Spread Rate (Arizona Test Method 411)

Name of Approved Independent Laboratory Performing Testing:
Test Date: Distributor Truck Owner:
Truck Make: VIN Number:
Truck Number: License Plate Number:
Date of Certificate Issuance: Date of Certificate Expiration:
This is to certify that the distributor truck identified above complies with the requirements of Arizona Test Method 411 and Subsection 404-3.02(A) of the ADOT Specifications.
(Region Name) Regional Materials Engineer:(Name)
(Signature)

BITUMINOL	D.O.T. JS DISTRIBUTOR ERTIFICATION
TRUCK LICENSE PLATE NUMBER	
DATE TESTED	
TESTED BY	
44-0420 R02/13	

(Sticker shown above is larger than actual size.)

(Sticker has silver lettering on a red background.)