

# Bridge Deck Placement Data Form

Name of person completing this form: \_\_\_\_\_ Phone number: \_\_\_\_\_

### Bridge Data

Low SP No. \_\_\_\_\_ Mn/DOT Mix No. \_\_\_\_\_  
 Br. No. \_\_\_\_\_ Br. Location: \_\_\_\_\_ District: \_\_\_\_\_  
 Top Trans. Bar Size & Spacing: \_\_\_\_\_ Bot. Trans. Bar Size & Spacing: \_\_\_\_\_  
 Superstructure Type: \_\_\_\_\_ Abutment Type: \_\_\_\_\_ No. Spans: \_\_\_\_\_  
 Skew Angle: \_\_\_\_\_ Deck Width (ft): \_\_\_\_\_ Beam Depth: \_\_\_\_\_ (in) Orientation: \_\_\_\_\_  
 Beam Spacing: \_\_\_\_\_ Span Lengths: \_\_\_\_\_ Total Length: \_\_\_\_\_

### Deck Placement Data

Attach copies of batch tickets from all loads that were tested for slump, air, strength, temperature.

Include ALL test results on the batch ticket (air content, slump, cylinder #, conc temperature).

Additional conc temp readings: \_\_\_\_\_

Placement Date: \_\_\_\_\_ Fin. Start Time: \_\_\_\_\_ Fin. End Time: \_\_\_\_\_

Total no. of cubic yards placed: \_\_\_\_\_ Avg. Placement Rate (yds/hr): \_\_\_\_\_

Placement equip:  Air Screed  Paving Machine  Other: \_\_\_\_\_

Air temp at start of placement: \_\_\_\_\_ Wind speed: \_\_\_\_\_ Humidity: \_\_\_\_\_

Air temp at end of placement: \_\_\_\_\_ Wind speed: \_\_\_\_\_ Humidity: \_\_\_\_\_

Color of Beams: \_\_\_\_\_ Beam Sunlight Exposure: \_\_\_\_\_

Beam temp prior and during placement: \_\_\_\_\_

Method of Placement (pump, conveyor, bucket, etc.): \_\_\_\_\_

Contractor: \_\_\_\_\_

### Curing Data

Date/Time burlap applied: \_\_\_\_\_ Date/Time burlap removed: \_\_\_\_\_

Length of curing period: \_\_\_\_\_ (hrs.) Curing Material: \_\_\_\_\_

Was the surface kept continually wet during curing?  Yes  No

Were temperature gauges installed in the deck?  Yes  No (If yes, submit temperature data, if no

indicate the deck & ambient temp at 24 & 48 hrs. after placement: 24 hrs: \_\_\_\_\_ 48 hrs: \_\_\_\_\_

Weather conditions during curing (rain, dry, windy, etc): \_\_\_\_\_

Indicate the maximum and minimum time that elapsed prior to placing curing: \_\_\_\_\_

### Crack Survey

Indicate any visible cracking on an attached framing plan. Use red for bottom of deck cracks, use blue for top of deck cracks.

Complete the crack survey at time of deck form removal.

Date of deck form removal: \_\_\_\_\_ Date of crack survey: \_\_\_\_\_

A follow up survey will be conducted within one year.

Comments (discuss delays in placement, concrete problems, etc.): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Submit Questions, Completed Form, Batch Tickets, etc. to:

Mark Spafford, MnDOT Bridge Office, MS 610, 3485 Hadley Ave. North, Oakdale, MN 55128 (651) 366-4564