

For laboratory use only Submission Request No. (SRN)

Test Request No. (TRN)

## TEST REQUEST FOR IN-SITU TESTING FOR ROAD SURFACE

Account No. (if available)	Customer Test Request Ref. No.
(Please provide the following project information if account no. is not available)	(Please limited to 14 characters including insert "R" after the Customer Test Request Ref. No. if the sample submitted as re-test.)
Customer (Works Dept/Office)	Contract No.
Job Title	Job No.
Work/Site Location	

Method (Select appropriate box)		Test Description	PWLTM no.	No. of sample(s)
	TRRL Supplementary Report 290	Determination of surface regularity by rolling straight edge	BIT 4.3	
	GS(1992) App. 10.1 GS(2006) App. 10.1	Determination of texture depth of carriageways	BIT 4.5	
	GS(1992) App. 9.1 GS(2006) App. 9.1	Determination of permeability of friction course	BIT 4.8	
	GS(1992) Cl. 10.55(3) GS(2006) Cl. 10.55(3)	Determination of longitudinal and transverse surface regularity of carriageways by 3 meter straightedge	BIT 4.9	
	Guidance Notes on Road Testing (RD/GN/009)	Determination of skid resistance value of road surface in accordance with guidance notes on road testing (RD/GN/009) issued by highways department	MIS 2.1	

BIT 4.5	:	GS1992 App. 10.1	GS2006 App. 10.1
BIT 4.8	:	GS1992 App. 9.1	GS2006 App. 9.1
BIT 4.9	:	GS1992 App. 10.55(3)	GS2006 App. 10.55(3)

Notes :- <sup>(1)</sup> To be completed by a project works supervisor grade officer or above. (2)

To be completed by a project inspectorate grade officer or above (or his delegate).

## Testing location will be shown on site by <sup>(1)</sup> :-

Test(s) requested by (2) :-

Signature	:		Signature	:	
Name	:		Name	:	
Post	:		Post	:	
Tel./Fax No.	:	/	Tel./Fax No.	:	/
Date	:		Date	:	

Fill in the box below the name, mailing and e-mail address to which the test report(s) should be sent or else mark 🗌 "To be collected" if the customer requests to collect the report(s) from the laboratory in person.

Preliminary results	
Fax No.:	



Public Works Laboratories Geotechnical Engineering Office, Hong Kong

For laboratory use only	
Submission Request No. (SRN)	
Test Request No. (TRN)	

## SAMPLE(S) INFORMATION

Contract No.:	Customer Test Request Ref. No.		
Type of road surface:			
Location of test sections:			
Location plan of test position (provided by customer):	□ Yes	□ No	

Location plan of test position (Plan reference no.):

Additional sample/testing information:

PWLTM no.	Test position no.	No. of sample(s)	Test lane	Chainage / Grid reference	Offset