



TRAFFIC CONTROL INSPECTION REPORT

Contract Id _____ County _____

Project No. _____ Road Name _____

Contractor _____

Inspector _____ Section Engineer _____

This form is to be completed daily when there is traffic control restricting the normal traffic pattern, i.e. lane closures, temporary detours, etc. At least once per week, the form should be completed documenting the condition of signing, cones or barrels being used for delineation, traveled surface (pot holes, mud, dirt, striping, delineators). Whenever possible, the inspection should be made in the company of the contractor's traffic control coordinator or superintendent. For any areas receiving UNACCEPTABLE, the form is to be signed by the traffic control coordinator or superintendent, a deadline established for correction based upon specification 112.03.15, a copy given to the contractor, and time & date that the non-compliant issue was corrected. Penalties for failure to correct the unacceptable or noted items needing corrections will result in penalties being assessed in accordance with specification 112.03.15.

| | N/A | ACCEPTABLE | UNACCEPTABLE |
|--------------------------------|-----|------------|--------------|
| CONES/BARRELS | | | |
| STRIPING | | | |
| BARRICADES | | | |
| VARIABLE MESSAGE BOARDS | | | |
| CONSTRUCTION SIGNS | | | |
| DELINEATORS | | | |
| LANE CLOSURES | | | |
| PAVEMENT MARKERS | | | |
| CONDITION OF TRAVELLED ROADWAY | | | |
| TEMPORARY TRAFFIC SIGNALS | | | |
| DETOUR SIGNAGE | | | |

Additional Remarks Regarding Non-Compliant Issues or Items Other than those listed Above That Need Attention:

Time & Date for Corrections to be Complete: _____

Reviewed By: _____ (KYTC Representative)
(Sign & Date)

Reviewed With: _____ (Contractor Representative)
(Sign & Date)

Time & Date that Corrections were Completed: _____

Reviewed By: _____ (KYTC Representative)
(Sign & Date)

Reviewed With: _____ (Contractor Representative)
(Sign & Date)