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| **SECTION 1: CONTRACT INFORMATION** |
| **CONTRACT ID**      | **CONTRACTOR**      |
| **SECTION ENGINEER**      | **DISTRICT & COUNTY**      |
| **SECTION 2: GUARDRAIL DESCRIPTIONS & QUANTITIES** |
| **DESCRIPTION** | **UNIT** | **QTY. LEAVING PROJECT** | **QTY. RECEIVED @ BB YARD** |
| Guardrail (includes end treatments & crash cushions) | LF |       |       |
| Steel Posts | EACH |       |       |
| Steel Blocks | EACH |       |       |
| Wood Offset Blocks | EACH |       |       |
| Back Up Plates | EACH |       |       |
| Crash Cushion | EACH |       |       |
| Nuts, Bolts, Washers | Bag/Bckt |       |       |
| Damaged rail to maintenance facility | LF |       |       |
| Damaged posts to maintenance facility | EACH |       |       |
| **SECTION 3: REQUIRED SIGNATURES PART 1** *(required before leaving project site)* |
| **SECTION ENGINEER’S REPRESENTATIVE NAME (***(Print.)* |
| **SECTION ENGINEER’S REPRESENTATIVE SIGNATURE** | **DATE** |
| **CONTRACTOR’S REPRESENTATIVE NAME** *(Print.)* |
| **CONTRACTOR’S REPRESENTATIVE SIGNATURE** | **DATE** |
| **SECTION 4: REQUIRED SIGNATURES PART 2** *(required after arrival at Bailey Bridge Yard)* |
| **Note:** All material on the truck must be counted & the quantity received column completed before signatures. |
| **BAILEY BRIDGE YARD REPRESENTATIVE NAME** *(Print.)* |
| **BAILEY BRIDGE YARD REPRESENTATIVE SIGNATURE** | **DATE** |
| **CONTRACTOR’S REPRESENTATIVE NAME** *(Print.)* |
| **CONTRACTOR’S REPRESENTATIVE SIGNATURE** | **DATE** |
| **Note:** Payment for the bid item, remove guardrail, will be based upon the quantities shown in the Bailey Bridge Yard received column. Payment will not be made for guardrail removal until the guardrail verification sheets are electronically submitted to the Section Engineer by the Bailey Bridge Yard representative. |
| **Completed form submitted to Section Engineer by** | **DATE** |

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