

**Flexible Pavements of Ohio**  
**QUALITY ASPHALT PAVING AWARD**  
**2011 Nomination Form**

**DEADLINE FOR SUBMISSION OF NOMINATIONS IS SEPTEMBER 30, 2011.**

**Project Title and Location** (Please include owner agency, project or contract identification, physical address of project, intersecting roadways, and/or project limits.)

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**Description of the Work** (Suggested information includes the type of work performed, project significance, unique constructability issues, project complexity, what makes the work exceptional, and any other interesting details which makes this project worthy of an award.)

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**Description of Quality Control/Quality Assurance (QA/QC) Measures Performed** (If the work was not subject to normal ODOT QC/QA, describe the quality control measures required by the contract: including: Mix production QC tests, density testing results, Smoothness/profilograph measurements, etc.)

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**Contractor and Owner Acknowledgement the project meets all of the following criteria:**

- The project is free of visible signs of segregation;
- All quality control measures described by the contract item number were performed;
- Quality control documentation indicates all test results fall within the allowable limits of the specification;
- Your evaluation of this work would find it described as **EXCEPTIONAL**.

Contractor's Acknowledgement (Contractor/Company Name/Division)

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Contractor's Mailing Address

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Name and Signature of Authorized Contractor Representative

Authorized Contractor Representative Contact Information

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Owner Agency Acknowledgement (Public Agency/Company Name)

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Owner Agency Mailing Address

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Name and Signature of Authorized Owner Agency Representative

Authorized Owner Agency Contact Information

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Note: In lieu of the owner's representative signing this nomination form, the owner's representative may submit separately a completed copy of the "Owner Acknowledgment" form signed by an authorized representative of the owner agency.

**Flexible Pavements of Ohio**  
**QUALITY ASPHALT PAVING AWARD**  
**2011 Nomination Support Documentation Form**

**Submit the Following Project Support Documentation with this Form: (check off list)**

\_\_\_\_\_ **Photograph:** A high resolution digital image on CD or flash media suitable for publication.

\_\_\_\_\_ **Map** clearly marked to show the project location and limits.

\_\_\_\_\_ **Summary of Pavement Design Form(s)**

\_\_\_\_\_ **Job Mix Formulas (JMF)** for all mixes used on project, submit copies of ODOT JMF approval or other indicating mix proportions, RAP, RAS and/or WMA.

\_\_\_\_\_ **QC Test Results Summary Form** for each JMF used on the project, showing the overall average and standard deviation of air voids, asphalt content, critical sieves and field density.

\_\_\_\_\_ **A summary of all required and/or performed smoothness measurements, IRI.**

Return award nomination form, support documentation form and all supporting documentation to:

**Flexible Pavements of Ohio**  
**525 Metro Place North, Suite 101**  
**Dublin, OH 43017-5504**

**Flexible Pavements of Ohio**  
**QUALITY ASPHALT PAVING AWARD**  
**Pavement Design Summary Form**

**Project Title and Location** (Please include owner agency, project or contract identification, physical address of project, intersecting roadways, and/or project limits.)

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<b>Asphalt Mix</b>	<b>Type of Mix, JMF ID or other descriptor (1)</b>	<b>Mix Design Method (2)</b>	<b>Thickness</b>	<b>Tons Used (English)</b>
<b>Surface Course</b>				
<b>Intermediate Course (If applicable)</b>				
<b>Leveling Course (If applicable)</b>				
<b>Base Course</b>				
<b>Other</b>				
<b>TOTAL</b>				

(1) Provide a clear identifier to match the material in this table to a JMF submitted with the project nomination.

(2) Indicate M (Marshall), S (Superpave, gyratory), R (recipe) or other mix design method (specify).

Submit additional forms as needed for additional JMFs used on the project.

**Flexible Pavements of Ohio  
QUALITY PAVING AWARD  
QC Test Results Summary Form**

**Project Title and Location** (Please include owner agency, project or contract identification, physical address of project, intersecting roadways, and/or project limits.)

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JMF or Mix Identification: \_\_\_\_\_

	Percent passing sieve					
	1/2 inch (12.5 mm)	No. 4 (4.75 mm)	No. 8 (2.36 mm)	% AC	% Air Voids (plant lab/QC)	Field density ( % of TMD)
JMF required value						
Avg. test results						
Std. deviation (1)						

JMF or Mix Identification: \_\_\_\_\_

	Percent passing sieve					
	1/2 inch (12.5 mm)	No. 4 (4.75 mm)	No. 8 (2.36 mm)	% AC	% Air Voids (plant lab/QC)	Field density ( % of TMD)
JMF or required value						
Avg. test results						
Std. deviation (1)						

(1) PLEASE NOTE: The standard deviation is a statistically calculated value and is not the same thing as the deviation of test results from the Job Mix Formula. Use additional forms as necessary to report results for other JMFs used on the nominated project.

**Flexible Pavements of Ohio**  
**QUALITY ASPHALT PAVING AWARD**  
**Owner Acknowledgment Form**

**Project Title and Location** (Please include owner agency, project or contract identification, physical address of project, intersecting roadways, and/or project limits.)

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**PROEJCT QUALIFICATION:** For nominations to be considered the project must meet all of the following criteria:

- The project is free of visible signs of segregation;
- All quality control measures described by the contract item number were performed;
- Quality control documentation indicates all test results fall within the allowable limits of the specification; and
- Your evaluation of this work would find it described as **EXCEPTIONAL**.

Owner Agency Acknowledgement (Public Agency/Company Name)

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Owner Agency Mailing Address

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Name and Signature of Authorized Owner Agency Representative

Authorized Owner Agency Contact Information

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Return completed owner acknowledgement form to:

**Flexible Pavements of Ohio**  
**525 Metro Place North, Suite 101**  
**Dublin, OH 43017-5504**  
**Fax: (614) 791-4800**