

## Mn/DOT Maintenance Work Zone Inspection Short Form

DISTRICT:	SUBAREA:	SP / PERMIT / TH:	
DATE:	TIME:	WEATHER:	
REVIEWED BY:			

### ROADWAY:

<input type="checkbox"/> 2 LANE 2 WAY	4 LANE: <input type="checkbox"/> FREEWAY <input type="checkbox"/> DIVIDED <input type="checkbox"/> UNDIVIDED	<input type="checkbox"/> OTHER
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### OPERATION:

	<input type="checkbox"/> DAY <input type="checkbox"/> NIGHT	WORK ( <input type="checkbox"/> IN <input type="checkbox"/> NOT IN) PROGRESS	
<input type="checkbox"/> MOBILE/MOVING	<input type="checkbox"/> STATIONARY :	<input type="checkbox"/> ≤ 1 HR	<input type="checkbox"/> ≤ 12 HRS <input type="checkbox"/> ≤ 3 DAYS <input type="checkbox"/> > 3 DAYS
LAYOUT(S)		<input type="checkbox"/> ADDITIONAL:	
<input type="checkbox"/> LANE CLOSURE	<input type="checkbox"/> SHOULDER CLOSURE	<input type="checkbox"/> PILOT CAR	<input type="checkbox"/> BYPASS <input type="checkbox"/> 2L2W <input type="checkbox"/> DETOUR
<input type="checkbox"/> FLAGGING OPER	<input type="checkbox"/> PORTABLE SIGNALS	<input type="checkbox"/> OTHER:	
<input type="checkbox"/> PAVING	<input type="checkbox"/> MILLING	<input type="checkbox"/> GRADING	<input type="checkbox"/> SWEEPING/FLUSHING
<input type="checkbox"/> SHOULDERING	<input type="checkbox"/> PATCHING	<input type="checkbox"/> STRIPING	<input type="checkbox"/> CRACK SEALING
<input type="checkbox"/> GUARDRAIL	<input type="checkbox"/> CULVERTS	<input type="checkbox"/> JOINT REPAIR	<input type="checkbox"/> BRIDGE INSPECTION
<input type="checkbox"/> DECK REPAIR	<input type="checkbox"/> UTILITY	<input type="checkbox"/> OTHER:	
<b>SPEED LIMIT:</b>			
<input type="checkbox"/> POSTED:	MPH	<input type="checkbox"/> ADVISORY:	MPH <input type="checkbox"/> WZ: MPH

1. SEE FIELD MANUAL Pages 6K-xxi TO 6K-xxiii FOR DROP OFF DELINEATION STANDARDS

2. SEE FIELD MANUAL Pages 6K-93 TO 6K-106 FOR QUALITY STANDARDS

DRIVE THROUGH:	N/A	YES	NO	COMMENTS	FOLLOW UP	
					REQD	COMPL
MANEUVERABLE TRAFFIC SHIFTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE ADVANCE WARNING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE SIGN SEQUENCE/SPACING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE CHANNELIZER SPACING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE ARROW BOARD MODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE WORK AREA PROTECTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE WORKER PPE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE EQUIP/MATERIAL STORAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE DROP OFF DELINEATION <sup>1</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE FIELD MANUAL LAYOUT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
SIGN CONDITION (A=ACCEPTABLE, M=MARGINAL, U=UNACCEPTABLE) <sup>2</sup>	<input type="checkbox"/>	<input type="checkbox"/> A <input type="checkbox"/> M	<input type="checkbox"/> U		<input type="checkbox"/>	<input type="checkbox"/>
CHANNELIZER CONDITION (A=ACCEPTABLE, M=MARGINAL, U=UNACCEPTABLE) <sup>2</sup>	<input type="checkbox"/>	<input type="checkbox"/> A <input type="checkbox"/> M	<input type="checkbox"/> U		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> NO ACTION REQUIRED		<input type="checkbox"/> FOLLOW UP REQUIRED BY:				
<input type="checkbox"/> ACTION OBSERVED ONSITE		<input type="checkbox"/> FOLLOW UP COMPLETE:				

FLAGGING:	N/A	YES	NO	COMMENTS	FOLLOW UP	
					REQD	COMPL
ADEQUATE ADVANCE SIGNING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE PROCEDURE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE POSITION/VISIBILITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE HI-VIS CLOTHING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
APPROPRIATE COMMUNICATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ADEQUATE ATTENTION/FOCUS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
ESCAPE ROUTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
CERTIFICATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> NO ACTION REQUIRED		<input type="checkbox"/> FOLLOW UP REQUIRED BY:				
<input type="checkbox"/> ACTION OBSERVED ONSITE		<input type="checkbox"/> FOLLOW UP COMPLETE:				