North Carolina Department of Transportation
Division of Highways-Materials and Tests Unit

Control Strip Density

Date:	

Project:		**County:**		**Control Strip #:**	
From Station:		**To Station:**		**Lane:**	

Layer:		**Depth:**		**Width:**		**Route:**		**Gauge Serial #:**	

Test Mode:		**Material:**		**Quarry:**	

STANDARD COUNTS		**ABC Conventional Density Test No. 3**	
Density:	**Moisture:**	**Lab Unit Weight:**	
		Percent Compaction:	%
		Form 504 Test #:	
		Station #:	

Test:	**Station:**	**ABC Dry Density:**	**Percent Moisture:**	**Percent Lab Unit Weight:**
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

AVG. (kg/m3)
ABC Target Density _____

Signature Technician:		
Certification #:		
Resident Engineer:		