



ROCHESTER

— *Minnesota* —



DEPARTMENT OF PUBLIC WORKS
201 4th Street SE, Room 108
Rochester, MN 55904-3740
(507) 328-2400
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SUBGRADE PROOF ROLL

Date

Project Name

Project Number

Consultant Engineer's Representative

Contractor's Representative

City of Rochester's Public Works Representative

Test:	Initial	Re-Test
Name of Roadway:	_____	_____
Roadway Stationing Begin:	_____	_____
Roadway Stationing End:	_____	_____
Date of Proof Roll:	_____	_____
Roadway Conditions:	_____	_____
Weather Conditions:	_____	_____
Equipment used for Proof Roll:	_____	_____
Roadway Stationing Pass:	_____ to _____	_____ to _____
	_____ to _____	_____ to _____
Roadway Stationing Fail:	_____ to _____	_____ to _____
	_____ to _____	_____ to _____

City of Rochester's or Consultant's Representative Inspection Comments: