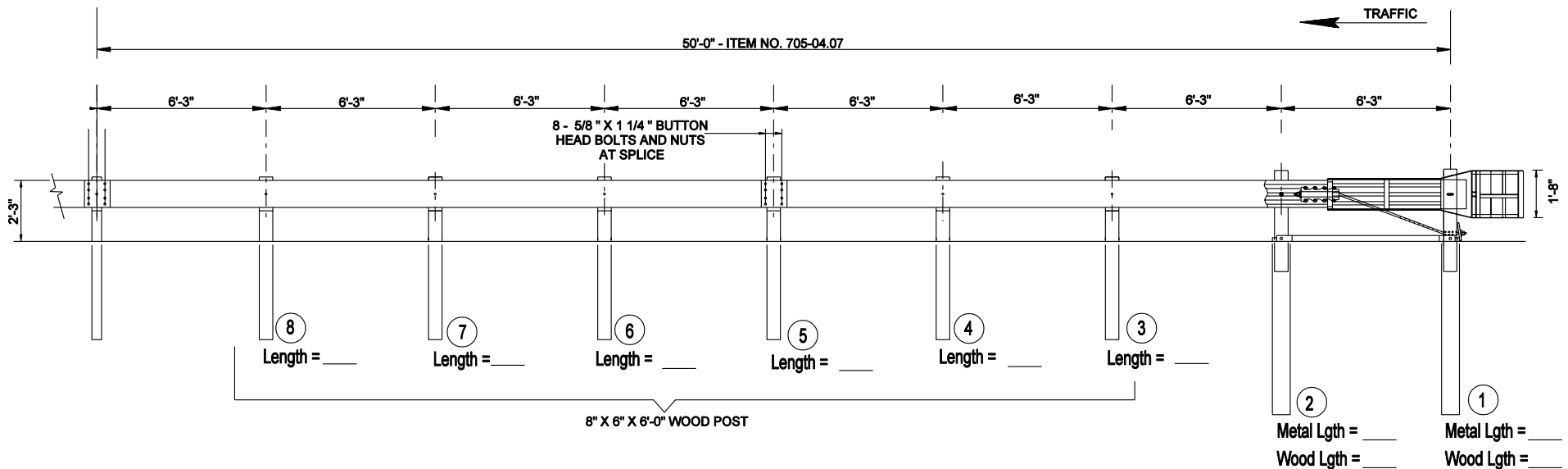


# INSPECTION FORM FOR TERMINAL UNITS

Date : \_\_\_\_\_ Roadway Name : \_\_\_\_\_ County : \_\_\_\_\_ Location : N S E W Road Side : Med. Shldr  
 Time : \_\_\_\_\_ Mile marker : \_\_\_\_\_ Inspector : \_\_\_\_\_  
(Print name) \_\_\_\_\_  
(Signature)



I/H Type : SKT350 ET2000 BEST OTHER (Circle One)

Quantity of Hazard stickers : \_\_\_\_\_

Circle new Wooden Post : 1 2 3 4 5 6 7 8

Feet new Guardrail : \_\_\_\_\_

Cable Taut : \_\_\_\_\_

Tubes Damaged (i.e. Sawed or Torched ) YES NO

( If YES, Please Comment below )

Lane Closure needed : \_\_\_\_\_

Any old Guardrail reused ? \_\_\_\_\_

Photographed by : \_\_\_\_\_

Comments : \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_