

# WORK ZONE TRAFFIC CONTROL INSPECTION FORM



|                                   |                       |              |  |                              |     |           |
|-----------------------------------|-----------------------|--------------|--|------------------------------|-----|-----------|
| Project No.                       |                       |              |  | Date/time                    | / / | a.m./p.m. |
| Location                          |                       |              |  | City                         |     | State     |
| Lane Width                        |                       | No. of Lanes |  | Posted Speed Limit           | MPH |           |
| Weather/Lighting Conditions       |                       |              |  | Project Type                 |     |           |
| Competent Person                  |                       |              |  |                              |     |           |
| Work Duration <i>(Circle One)</i> | Long-Term Stationary  |              |  | Intermediate-Term Stationary |     |           |
|                                   | Short-Term Stationary |              |  | Short-Duration Mobile        |     |           |

## ADVANCE WARNING SIGNS

| SIGN QUANTITY:           |     |    |                          |
|--------------------------|-----|----|--------------------------|
| Appropriate No. Of Signs | Yes | No | <i>(If No, Explain)</i>  |
| Missing Sign Series      | Yes | No | <i>(If Yes, Explain)</i> |
| Missing Specific Sign(s) | Yes | No | <i>(If Yes, Explain)</i> |

| SIGN CONDITION | Good | Fair | Poor |
|----------------|------|------|------|
| Cleanliness    |      |      |      |
| Legibility     |      |      |      |
| Reflectivity   |      |      |      |

| LEGENDS                | Good | Fair | Poor |
|------------------------|------|------|------|
| Appropriate Legends    |      |      |      |
| Unneeded Signs Visible |      |      |      |
| Signs Posted, No Work  |      |      |      |

| SIGN PLACEMENT | Good | Fair | Poor |
|----------------|------|------|------|
| Height         |      |      |      |
| Visibility     |      |      |      |
| Spacing        |      |      |      |

| ARROW PANEL A, B, C, or D | Good | Fair | Poor |
|---------------------------|------|------|------|
| Placement                 |      |      |      |
| Delineated/Shielded       |      |      |      |
| Removed When Not In Use   |      |      |      |

| NON-STANDARD SIGNS |  |       |  |
|--------------------|--|-------|--|
| Appropriate Legend |  | Shape |  |
| Color              |  | Size  |  |

Overall Advance Warning: Excellent \_\_\_\_\_ Adequate \_\_\_\_\_ Inadequate \_\_\_\_\_

Comments:

## CHANNELIZING DEVICES

| TYPE OF UPSTREAM TAPER <i>(Circle One)</i> |          |          |                   |
|--------------------------------------------|----------|----------|-------------------|
| Merging                                    | Shifting | Shoulder | One-Lane, Two-Way |

| DOWNSTREAM TAPER <i>(Optional)</i> |     |    |              |               |
|------------------------------------|-----|----|--------------|---------------|
| USED                               | Yes | No | Taper Length | Meters / Feet |

| CHANNELIZING DEVICE CONDITION |      |      |      |                 |      |      |      |
|-------------------------------|------|------|------|-----------------|------|------|------|
| DEVICE                        | Good | Fair | Poor | DEVICE          | Good | Fair | Poor |
| Barricades Type I, II, or III |      |      |      | Tubular Markers |      |      |      |
| Drums                         |      |      |      | Vertical Panels |      |      |      |
| Cones                         |      |      |      | Warning Lights  |      |      |      |

| CHANNELIZING DEVICE CONDITION <i>(Continued)</i> |                  |                     |
|--------------------------------------------------|------------------|---------------------|
| Appropriate Ballasting                           | Yes              | No <i>(Explain)</i> |
| Appropriate Battery Mount                        | Yes              | No <i>(Explain)</i> |
| Adequate Spacing                                 | Yes              | No <i>(Explain)</i> |
| Adequate Taper Length                            | Yes              | No <i>(Explain)</i> |
| Appropriate No. of Devices                       | Yes              | No <i>(Explain)</i> |
| Non-Standard Device                              | <i>(Explain)</i> |                     |

Overall Channelization:    Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

## PAVEMENT MARKINGS

| USE OF PAVEMENT MARKINGS |     |                           |
|--------------------------|-----|---------------------------|
| Markings Used            | Yes | No                        |
| Easily Understandable    | Yes | No <i>(If No Explain)</i> |

| CONDITION      | Good | Obscured | Faded | Damaged/Dislodged |
|----------------|------|----------|-------|-------------------|
| Paint / Tape   |      |          |       |                   |
| Raised Markers |      |          |       |                   |

Overall Pavement Marking:    Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

## FLAGGING

| FLAGGER USE                                         |     |    |                 |                   |                             |                       |
|-----------------------------------------------------|-----|----|-----------------|-------------------|-----------------------------|-----------------------|
| Flagger(s) Used                                     | Yes | No | No. of Flaggers |                   |                             |                       |
| Flagger Station Preceded By Advance Warning Signs   |     |    |                 | Yes               | No <small>(Explain)</small> |                       |
| Flaggers Are Clearly Visible To Approaching Traffic |     |    |                 | Yes               | No <small>(Explain)</small> |                       |
| Approaching Traffic Has Sufficient Distance To Stop |     |    |                 | Yes               | No <small>(Explain)</small> |                       |
| Flagger Stations Illuminated (Night Time)           |     |    |                 | Yes               | No                          | N/A                   |
| Signaling Device                                    |     |    |                 | Slow/Stop Paddles |                             | Flags                 |
| Communication Used Between Flaggers                 |     |    |                 | Visual Contact    |                             | Two-Way Radio Contact |
| Flagging Technique                                  |     |    |                 | Good              | Fair                        | Poor                  |

| FLAGGER ATTIRE          |     |    |
|-------------------------|-----|----|
| High-Visibility Apparel | Yes | No |
| Hard Hats               | Yes | No |

Overall Flagging:                      Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

## ROADSIDE SAFETY

| Type of Barrier             | Concrete |      | Timber Curb                   | Guide Rail               | Other |             |
|-----------------------------|----------|------|-------------------------------|--------------------------|-------|-------------|
| Barrier Condition           | Good     | Fair | Poor <small>(Explain)</small> |                          |       |             |
| Flared End Treatment Needed |          | Yes  | No                            | Impact Attenuator Needed |       | Yes      No |

| BARRIER DELINEATION           |      |      |             |                          |  |
|-------------------------------|------|------|-------------|--------------------------|--|
| Lights                        | Good | Fair | Not Working |                          |  |
| Reflectors                    | Good | Fair | Poor        | Too Small                |  |
| Adequate Drop-Off Delineation |      | Yes  | No          | <small>(Explain)</small> |  |
| Adequate Clear Zone           |      | Yes  | No          | <small>(Explain)</small> |  |

Overall Roadside Safety:                      Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

## INTERNAL TRAFFIC CONTROL

| INTERNAL TRAFFIC CONTROL PLAN REQUIREMENTS                                                | YES | NO |
|-------------------------------------------------------------------------------------------|-----|----|
| Contact Information For The General Contractor And Subcontractors Available               |     |    |
| All Site Personnel Have Been Trained on The Specific Internal Traffic Control Plan (ITCP) |     |    |
| Worker and Visitor Parking Areas Have Been Designated                                     |     |    |
| Independent Truck Drivers Have Been Oriented Prior to Entering The Work Space             |     |    |
| Areas Around Specific Pieces of Equipment and Operations Have Been Delineated             |     |    |
| Locations For Storing Materials And Servicing Equipment Have Been Designated              |     |    |
| Internal Signs And Traffic Control Devices Have Been Posted/Erected                       |     |    |
| Speed Limit Within The Work Zone Has Been Posted                                          |     |    |
| Adequate Lighting Has Been Provided For Night Operations                                  |     |    |
| Channels Of Communication Regarding Changes To The ITCP Have Been Designated              |     |    |
| Communication Between Workers On Foot And Equipment Operators Has Been Established        |     |    |
| Communication Between Equipment Operators Has Been Established                            |     |    |

Overall Rating For The ITCP: Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

## MISCELLANEOUS TRAFFIC CONTROL

| CONDITION                                                 | YES  | NO          | EXPLANATION                             |
|-----------------------------------------------------------|------|-------------|-----------------------------------------|
| Unprotected Operations or Equipment In Roadway            |      |             | (If Yes, Explain)                       |
| Temporary Traffic Signal Operation/Installation Effective |      |             | (If No, Explain)                        |
| Original Signs/Delineation In Good Condition              |      |             | (If No, Explain)                        |
| Posted Speed Limit                                        | MPH  | Appropriate | Too Fast Too Slow                       |
| Access Control                                            | Good | Fair        | Poor                                    |
| PEDESTRIAN SAFETY                                         |      |             |                                         |
| Adequate Travel Path                                      | Yes  | No          | Adequate Protection From Hazards Yes No |

Overall Misc. Traffic Control: Excellent\_\_\_\_\_ Adequate\_\_\_\_\_ Inadequate\_\_\_\_\_

Comments

OVERALL RATING:   Excellent\_\_\_\_\_   Adequate\_\_\_\_\_   Inadequate\_\_\_\_\_