

Project Number: _____ Project Location: _____
Date: _____

LOCAL FIELD OPERATIONS TESTING COMPLETION NOTIFICATION

Physical and Electrical Inspection Completed? Inspector Name:	Yes / No	Date:
Integrator Name:		
Integrator Phone and e-mail:		
Contractor Name:		
Contractor Phone and e-mail:		
Notes:		

This memo is to serve as notice that the following ITS component(s) have successfully passed the Local Field Operations Test(s) and are ready to begin Acceptance Testing:

- CCTV • Traffic Detection Devices • Ramp Meter Signals
- VMS • RWIS • Other _____

Detailed test results, discrepancies, and resolutions are attached.

Sincerely,

Name

Date