

SHEET 13 LTPP TRAFFIC DATA VEHICLE WEIGHT DATA TRANSMITTAL FORM	*STATE ASSIGNED ID [- - - -]
	*STATE CODE <u>116</u>
	*SHRP SECTION ID <u>110071</u>

HIGHWAY RT. NO. (THIS SESSION) US 30

MILEPOST NO. OR LOCATION (THIS SESSION) 205.1

FILENAME W161007.LS0 DISK/TAPE ID _____

BEGINNING DATE 10/29/90 BEGINNING TIME 17:33

ENDING DATE 11/04/90 ENDING TIME 15:20

COUNT DURATION 5 [] HOURS [☒] DAYS [] MONTHS

WEIGHT SCALE TYPE: PORT. WIM ☒ PERM. WIM _____ OTHER _____

EQUIPMENT MAKE/MODEL# Golden River

SENSOR TYPE CAPMAT

NAME OF SHA CLASSIFICATION SCHEME: _____

METHOD OF CALIBRATION AND FREQUENCY: _____

COMMENTS _____

_____ FILERS. TCD 324,395

FILL OUT ONE TRANSMITTAL SHEET FOR EACH DATA FILE SUBMITTED.

NAME OF PREPARER _____	PHONE # _____
DATE PREPARED <u>11/27/92</u>	

SHEET 13 LTPP TRAFFIC DATA VEHICLE WEIGHT DATA TRANSMITTAL FORM	*STATE ASSIGNED ID [_ _ _ _] *STATE CODE <u>16</u> *SHRP SECTION ID <u>1007</u>
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HIGHWAY RT. NO. (THIS SESSION) US 30

MILEPOST NO. OR LOCATION (THIS SESSION) 205.1

FILENAME W161007.K60 DISK/TAPE ID _____

BEGINNING DATE 9/06/90 BEGINNING TIME 8:20

ENDING DATE 9/10/90 ENDING TIME 8:20

COUNT DURATION 4 [] HOURS [☒] DAYS [] MONTHS

WEIGHT SCALE TYPE: PORT. WIM ☒ PERM. WIM _____ OTHER _____

EQUIPMENT MAKE/MODEL# GR

SENSOR TYPE CAP MAT

NAME OF SHA CLASSIFICATION SCHEME: _____

METHOD OF CALIBRATION AND FREQUENCY: _____

COMMENTS _____

_____ FILE K3.7CD 326,691 _____

FILL OUT ONE TRANSMITTAL SHEET FOR EACH DATA FILE SUBMITTED.

NAME OF PREPARER _____	PHONE # _____
DATE PREPARED <u>11/27/92</u>	

SHEET 13 LTPP TRAFFIC DATA VEHICLE WEIGHT DATA TRANSMITTAL FORM	*STATE ASSIGNED ID [_ _ _ _]
	*STATE CODE [16]
	*SHRP SECTION ID [1007]

HIGHWAY RT. NO. (THIS SESSION) US 30

MILEPOST NO. OR LOCATION (THIS SESSION) 205.1

FILENAME W161007.HK0 DISK/TAPE ID _____

BEGINNING DATE 6/21/90 BEGINNING TIME 14:20

ENDING DATE 6/25/90 ENDING TIME 13:20

COUNT DURATION 4 [] HOURS [☒] DAYS [] MONTHS

WEIGHT SCALE TYPE: PORT. WIM ☒ PERM. WIM _____ OTHER _____

EQUIPMENT MAKE/MODEL# GR

SENSOR TYPE CAP MAT

NAME OF SHA CLASSIFICATION SCHEME: _____

METHOD OF CALIBRATION AND FREQUENCY: _____

COMMENTS _____

File 2.TCD 666,253

FILL OUT ONE TRANSMITTAL SHEET FOR EACH DATA FILE SUBMITTED.

NAME OF PREPARER _____	PHONE # _____
DATE PREPARED <u>11/27/92</u>	