

**SHEET 12
LTPP TRAFFIC DATA
CLASSIFICATION DATA
TRANSMITTAL FORM**

*STATE ASSIGNED ID **[8908]***STATE CODE **[30]***SHRP SECTION ID **[7076]**HIGHWAY RT: (THIS SESSION) I-90 MILEPOST:(THIS SESSION) 544.8LOCATION: (THIS COUNT) ON I-90, .05 MILES NORTH OF WYOLA A-57

FILENAME: _____

BEGINNING DATE: JULY 1, 2013 BEGINNING TIME: 00:00ENDING DATE: JULY 31, 2013 ENDING TIME: 23:00OCCUR DURATION: 1 [] HOURS [] DAYS [XX] MONTHSVEHICLE CLASSIFICATION METHOD: FHWA X OTHER _____ # BINS _____

NOTE: If not previously provided to SHRP, please attach Sheet 6 describing the vehicle classification categories and also attach Sheet 7 describing how the SHRP would convert its classification scheme to the FHWA 13 Class System.

TYPE OF AVC EQUIPMENT: PORTABLE: _____ PERMANENT XXEQUIPMENT MAKE/MODEL #: DIAMONDSENSOR TYPE: PIEZOS

ADJUSTMENT FACTORS FOR ESTIMATING AVERAGE ANNUAL VOLUMES BY CLASSIFICATION: _____

GENERAL FACTORS: _____

CLASS SPECIFIC FACTOR: (PROVIDE BY CLASS OR CLASS GROUPS) _____

COMMENTS TO TEXT: Site is down

FILL OUT ONE TRANSMITTAL SHEET FOR EACH DATA FILE SUBMITTED:

NAME OF PREPARER Peder Jerstad PHONE # (406) 444-7217DATE PREPARED January 3, 2014

**SHEET 12
LTPP TRAFFIC DATA
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*STATE ASSIGNED ID **[8908]**

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HIGHWAY RT: (THIS SESSION) I-90 MILEPOST:(THIS SESSION) 544.8

LOCATION: (THIS COUNT) ON I-90, .05 MILES NORTH OF WYOLA A-57

FILENAME: _____

BEGINNING DATE: JUN 1, 2013 BEGINNING TIME: 00:00

ENDING DATE: JUN 30, 2013 ENDING TIME: 23:00

OCOUNT DURATION: 1 [] HOURS [] DAYS [XX] MONTHS

VEHICLE CLASSIFICATION METHOD: FHWA X OTHER _____ # BINS _____

NOTE: If not previously provided to SHRP, please attach Sheet 6 describing the vehicle classification categories and also attach Sheet 7 describing how the SHRP would convert its classification scheme to the FHWA 13 Class System.

TYPE OF AVC EQUIPMENT:PORTABLE: _____ PERMANENT XX

EQUIPMENT MAKE/MODEL #: DIAMOND

SENSOR TYPE: PIEZOS

ADJUSTMENT FACTORS FOR ESTIMATING AVERAGE ANNUAL VOLUMES BY CLASSIFICATION: _____

GENERAL FACTORS: _____

CLASS SPECIFIC FACTOR: (PROVIDE BY CLASS OR CLASS GROUPS) _____

COMMENTS TO TEXT: HAS BEEN CHANGED TO LENGTH UNTIL CLASSIFICATION CAN BE VERIFIED.

FILL OUT ONE TRANSMITTAL SHEET FOR EACH DATA FILE SUBMITTED:

NAME OF PREPARER Joe Tosoni PHONE # (406) 444-7217

DATE PREPARED September 4, 2013