

STATE OF LOUISIANA
 DEPARTMENT OF TRANSPORTATION & DEVELOPMENT
 MATERIALS & TESTING SECTION
 5080 FLORIDA BLVD., BATON ROUGE, LA 70806

**CERTIFICATE OF COMPLIANCE
 FOR
 LIQUID MEMBRANE – FORMING COMPOUNDS**

PROJECT NAME: _____	P. O. NUMBER: _____
PROJECT NUMBER: _____	CONTRACTOR: _____

PRODUCT TRADE NAME	APPROVED PRODUCER SUPPLIER CODE (APS CODE)	TYPE	MANUFACTURER LOT NUMBER	QUANTITY

The undersigned certifies that liquid membrane-forming compound(s) comply with the Louisiana Department of Transportation and Development Specifications for the type indicated above.

This certificate is invalid unless signed by an authorized representative of the company.

DATE SHIPPED TO JOBSITE: _____ COMPANY: _____

BY: _____
 (Authorized Company Representative Signature)

- COPIES:
- One copy shall accompany all shipments of the above listed materials for each product.

For LA DOTD Use Only:

Approved: _____ Date: _____

Remarks: _____

Shipments will be accepted only when accompanied by this official LA DOTD certificate form.