OFFER NO.			REV	/ . 8/00
Confirmed Receipt		USE ONLY)	MEETING :	
L	STATE OF			
D	STATE OF T DEPARTMENT OF TRANSPOR		NT	
	NEW PRODUCT EVALUATION	• • •	Л	
Trade name:	INFORMATION FOR EV			
Manufacturer (company name)	:			
Manufacturer contact person:				
Address:Street/P. O. Bo				
		_	State	e Zip code
Phone: ()	Fax: <u>(</u>)		
E-mail Address:		Web Address:		
Manufacturer's representative (If different than manufacturer)	(company name):			
Contact person:				
Address:				
Street/P. O. Bo		ty	State	e Zip code
Phone: ()	Fax: <u>(</u>)		
E-mail Address:		Web Address:		
Is product patented?: yes ☐ n	ıo ☐ applied for: ☐			
Recommended or primary use:				
Alternate or secondary use:				
Material composition (generic o	description):			
Alternate or comparable to wh	at existing materials or produ	ct:		
Meets requirements of following	ng specifications: AASHTO 🛘	ASTM Fed. Spec.	Others 🗖	
Is availability seasonal?: yes	□ no □			
Approximate delivery days after	er receipt of order:	_ Are quantities limited:	yes 🛭 no 🗖	
New on market: yes \square no \square	Estimated cost of material	per unit:		
Will special equipment be requ	ired to install product: yes	no 🗖 if yes, will manufac	turer/supplier furnis	sh the special
equipment and install the mate	rial: yes ☐ no ☐			
Are educational courses or film	ns available: yes 🛭 no 🗖 Has	this proposal been made p	reviously: yes 🖵 no	o 🗖
Additional information:				
Field test sites in the following	Jocations (state, contact per	son, telephone number):		
Manufacturer/supplier shall atta	ch twelve (12) copies of the fo	rm in addition to twelve (12)	<u>copies</u> the followin	g information
in order to substantiate, verify	or clarify its contents: specifi	cations, drawings, sketches	, pictures, warrant	y, installation
instructions, material safety da	ta sheet, product/material lite - OV		tification, and test	results.
	- Ov	OI .		

General notes: 1. Manufacturers/suppliers are encouraged to install their materials at the test sites.				
2.	All test materials will be furnished by the manufacturer/supplier at no cost to the Louisiana Department of Transportation and Development.			
3.	The manufacturer requesting evaluation of a new product shall submit to the NPE Coordinator completed NPE forms (copies acceptable) and copies of all product literature.			
4.	A separate form will be required for each material/system submitted for evaluation.			
5.	Incomplete NPE forms and/or erroneous information furnished as part of this form will result in the material being rejected for evaluation.			
6.	The NPE Coordinator shall review all forms and literature. The coordinator, if appropriate, shall assign an evaluation number and add the submittal to the agenda of the new product evaluation committee meeting for their review. The manufacturer shall be notified in writing of the initial committee actions. If the committee decides that the product has a potential use by the department, the committee shall refer the product to an evaluator. The NPE Coordinator shall inform the manufacturer of the department's willingness to evaluate the product.			
7.	The department reserves the right to return all unused samples to the manufacturer.			
8.	The NPE forms shall be submitted no later than one month prior to the meeting. Meetings are held in February, May, August and November.			
The manufacturer is hereby notified that the Louisiana Department of Transportation and Development reserves the right				
to release or distribute any of the information included in or attached to this form and the results obtained as part of our				
laboratory testing and field evaluation.				
	puisiana Department of Transportation and Developmentany new product for testing until this form			
is completed in accordance with the above notes, which authorizes				
the evaluation, and returned to the address shown below . All DOTD correspondence will be directed to the official of the manufacturer listed below.				
	Louisiana Department of Transportation and Development Materials & Testing Section Attention: New Product Evaluation Coordinator 5080 Florida Boulevard, Baton Rouge, LA 70806 Signed:			
	Name:			
	Title:			
	Manufacturer:			
	Address:			
	(Street, City, State, Zip Code) Date:			