



*Use separate sheets for each setup.* (May be altered to record Class A signs.)

Page

Contract Number	SR Number	Day	Date
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Sta A	Setup				Sta B
	Station	Time	Station	Time	
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
<b>Work Area</b>					
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
◇	—		—		◇
Sta C	↑	One Way Traffic (one or more lanes)	↑		Sta D
	↓	Two Way Traffic (two or more lanes)	↑		

Legend	
(List of Signs Used)	
◇ 1	_____
◇ 2	_____
◇ 3	_____
◇ 4	_____
◇ 5	_____
◇ 6	_____
◇ 7	_____
◇ 8	_____

Cones Yes     No                     
  Piloted Yes     No

Per Approved Plan Yes     No                     
 \_\_\_\_\_ Plan Title

Flagger/Spotter Sta	Start	End	Hours
Station A			
Station B			
Station C			
Station D			

Other Traffic Control Labor			
Name	Start	End	Hours

\_\_\_\_\_ Contractor

\_\_\_\_\_ Traffic Control Supervisor

Type of Traffic Control	Time Set Up	Time(s) Checked	Time Removed

**To be Completed by Contractor's Traffic Control Supervisor (TCS)**