Georgia Department of Transportation
Mandrel Test Report

Project No.:_____ **County:**_____

Date of Inspection:_____ **Pipe Installation Date:**_____

Pipe Location:_____

_____

Pipe Diameter:_____ **Mandrel Size:**_____

Fill Height (max. & min.):_____

Pipe Material (HDPE or PVC):_____

Pipe Manufacturer:_____

Traffic Bearing: **Yes**_____ **No**_____

Pipe Application:
Longitudinal Drain_____ **Cross Drain**_____ **Side Drain**_____

Length of Pipe Inspected:_____

Test Performed by (Company and Tester Name):_____

Pass_____ **Fail**_____

Comments:_____

_____

_____ _____

GDOT Inspector Signature **Contractor Signature**