



# CERTIFICATE OF COMPLIANCE FOR LOCALLY APPROVED NON-BULLETIN MATERIALS

## INSTRUCTIONS TO COMPLETE THE FORM

1. **COUNTY, LR/SR, SEC/SEG, ECMS#**  
To be completed by the party that will ship the material to the construction project, otherwise leave blank.
2. **NAME OF PRODUCER**  
To be completed by the party that is shipping locally approved material to the next destination.
3. **MEETS SPECIFICATION OR SPECIAL PROVISION REQUIREMENTS**  
To be completed by the party that is shipping locally approved material to the next destination.
4. **SHIPPED TO**  
List the name of the company that material is being shipped to.
5. **LOT NUMBER, QUANTITY, DESCRIPTION OF MATERIAL**  
To be completed by the party that is shipping locally approved material to the next destination.
6. **CHECK THIS BLOCK IF YOUR PRODUCT CONTAINS IRON OR STEEL**  
To be completed by the party that is shipping locally approved material to the next destination.
7. **VENDOR CLASSIFICATION (CHECK ONE BLOCK ONLY)**
  - If you are Producer (manufacturer, fabricator, or producer), check block # 1.
  - If you are a Shipper (distributor/supplier), check block # 2.
8. **CERTIFICATION REQUIREMENTS, Name, Title, Date, Company Name, and Signature**  
Enter the required information and sign the Certificate of Compliance form.
9. **COMPLETE LINE # 9 ONLY IF YOU CHECKED BLOCK # 2 ON LINE # 7, OTHERWISE LEAVE BLANK**  
List company that sold the material to you. (Company Name)

### IN ADDITION:

2. & 5. Private Label Companies who complete the Certificate of Compliance form CS-4171LA must identify the true manufacturer (Line 2) and the locally approved material (Line 5).

After completing the Certificate of Compliance form CS-4171LA, maintain the original at your company's location. A copy of the Certificate of Compliance form must accompany your material shipment to its next destination. Also, if you receive material shipments from other companies related to PennDOT projects, the accompanying Certificate of Compliance forms must be kept on file at your location. These files must be available for inspection and verification by a Department Representative for a period of not less than THREE years from the date of the last shipment.

**PROVIDE PRODUCT TECHNICAL DATA SHEET AND/OR DRAWINGS, AS APPLICABLE.**



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1. COUNTY: LR/SR: SEC/SEG: ECMS#: (To be completed by the party that will ship the material to the project, otherwise leave blank.)

2. I / WE hereby certify that the material listed on line 5 was produced by: (Name of Producer)

3. and the party listed above certifies that the material(s) on line 5 meets the requirements of Publication 408, Section(s) Contract Specification Contract Special Provision

4. The material listed below is being shipped to: (Company Name)

Table with 3 columns: LOT NO., QUANTITY, LOCALLY APPROVED NON-BULLETIN MATERIAL

6. CHECK HERE IF YOUR PRODUCT CONTAINS IRON OR STEEL. I certify the material identified above conforms to Sections 106.01 and 106.10(a) of Publication 408. CHECK ONE OF THE TWO BOXES: Product is 100% US Steel. Product contains minimal foreign steel in accordance with Act 3 and Buy America Attach receipts verifying the cost of the product's foreign steel and domestic steel.

CHECK THE BOX THAT APPLIES TO YOUR PRODUCT: Identifiable Steel - Steel products that contain permanent markings that identify that the material was melted and manufactured in the United States. Only Form CS-4171LA is required. Steel Products with In-Plant Inspection by a Department Representative - Steel products and products containing steel which received in-plant inspection by the Department or Department representative where it was verified that the steel was melted and manufactured in the United States. Only Form CS-4171LA is required. Unidentified Steel - Steel products that do not meet the definition of "Identifiable Steel" and do not receive in-plant inspection as defined above. Attach supporting documentation including invoices, bills of lading and mill test reports that positively identify that the steel was melted and manufactured in the United States.

7. VENDOR CLASSIFICATION (CHECK ONE BLOCK ONLY) - #1 PRODUCER #2 SHIPPER Also, complete line 9 I certify that the above statements are true and to the best of my knowledge, fairly and accurately describe the product(s) listed. I certify that the material being supplied is one and the same as provided to us by the manufacturer listed on this document and quantities listed above are accurate.

8. NAME (print): TITLE: COMPANY NAME:

SIGNATURE: DATE: By Responsible Company Official

9. List company that sold you the material(s) documented above: (Complete if you checked Block # 2 on line # 7, otherwise leave blank.) (Company Name)