



REPORT ON COMPACTION DENSITY BY NUCLEAR METHOD

(Reference: PTM No. 402)

Fill Out Completely. Original to be retained with project records. Remit copy to District Office

ECMS # _____ S.R. _____ Sec. _____ County _____ District _____ Date _____

TYPE OF CONSTRUCTION: Embankment Subgrade Pipe Backfill Other _____
(check one type only)

1. Test No.		9. Test Elevation, ft.	
2. Time of Test		10. Lift Height, in.	
3. Type of Material		11. Source Rod Position	
4. Source of Material		12. Target Density (Proctor), pcf	
5. Specific Gravity of Material (SG)		13. Optimum Moisture, %	
6. Station		14. % Passing 3/8" Sieve	
7. Offset		15. % Passing No. 200 Sieve	
8. Subgrade Elevation, ft.		16. Minimum % Compaction Required	

	Reading 1	Reading 2 - Rotate 90°	Reading 3 - Rotate 180°	Average (3 readings)
17. % of Compaction of Test				
18. Dry Density, pcf (DD)				
19. Wet Density, pcf (WD)				
20. Moisture, pcf (M)				
21. % Moisture (M%)				
22. Density Count (Shift + Counts)				
23. Moisture Count (Shift + Counts)				

24. Zero Air Voids Formula Check (Y/N)	
25. (P)ASS or (F)AIL	

DENSITY Standard Counts	MOISTURE Standard Counts	OPERATING LIMITS	
		Density	Moisture
		_____ to _____	_____ to _____

Tested By _____
 Gauge Manufacturer _____
 Gauge Model No. _____
 Calibration Date _____
 Remarks: _____

Zero Air Voids Formula

$$\frac{62.4}{DD} - \frac{1}{SG} \geq M\%$$