



QPL Product Submittal Form

For NHDOT use only:
Reference Number: _____

NHDOT Item Number(s): _____

Product Trade Name: _____ Date: _____

Manufacturer: _____

Address: _____ Website: _____

City: _____ State: _____ Zip: _____ Telephone: _____ Fax: _____

Representative: _____

Rep. Address (if different): _____ Email Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____ Fax: _____

Product Identification and Primary Use: _____

Material Composition: _____

VOC Content (g/l): _____

Alternate Use: _____

Outstanding Features or Advantages: _____

Alternative for Existing Product on NHDOT Qualified Products List? _____

Is the Product Patented? Yes _____ No _____ If No, Has One Been Applied For? _____

Is the Product Guaranteed? Yes _____ No _____

Conditions: _____

Meets Requirements of the Following Specifications:

AASHTO: _____ ASTM: _____

Fed. Spec.: _____ Others: _____

Product Availability: _____

Approximate Cost: _____

Year Placed on Market: _____

Background Description of Company: _____

Has Another Office of NHDOT Been Contacted? Yes _____ No _____

If Yes, Which? _____

Other States Approved (submit documentation): _____

Other States Evaluating: _____

Additional Information: _____

Information Furnished By: _____

Title: _____

Note: Samples will be accepted only upon NHDOT request

Please mail the completed form, MSDS, and other pertinent literature to:

Research Supervisor
Bureau of Materials and Research
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Concord, NH 03302-0483
Tel: (603) 271-3151
Fax: (603) 271-8700

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Form available at www.nh.gov/dot/research