STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION

Division of Materials Testing

280 West Street. Rocky Hill, CT 06067-3502

Report of Test on Portland Cement Concrete Cylinders

MAT- 308 REV 05/09

Inspector is responsible for unshaded portion. Lab personnel are responsible for shaded areas

Sample ID		***Curing Box Used***	☐ YES ☒ NO (*Check one*)
Structure/location where concrete was placed		**Source/Location**	
		Sampled From (i.e. chute/pump)	
Item Code*		**Sampled By**	
Item Quantity**		**Item Units**	
Material Quantity***		**Units (check one)**	☐ C.Y. ☐ CU.M
Brand of Cement			
Required Strength		**Contractor**	

Field Test Results	**Test 1**	**Test 2 Required if Material Fails Test 1**
Air (ASTM C173/C231)		
Conc. Temp (ASTM C1064)		
Slump (ASTM C143)		
Date Sampled		

* ***Measured at point of placement***

Specimen ID:	(1)	(2)	(3)	(4)	(5)	(6)
Age(s) Requested						
Date Received						
Date Tested						
Age Tested						
☐ 4 in. cylinder	***cylinder dia. Is 4 in. (102 mm) and cross sectional area is 12.57 in² (81.1 cm²)***					
☐ 6 in. cylinder	***cylinder dia. Is 6 in. (152 mm) and cross sectional area is 28.27 in² (182.4 cm²)***					
Maximum Load (AASHTO T- 22)						
Compressive Strength (PSI/Mpa)						
Fracture Type (a-e)						
Status						

***Item Number** : Contract Item under which Contractor is being paid for concrete that is represented by sample.

****Item Quantity**: Amount of concrete/Number of items represented by sample in pay units for that contract item. It is never the number of cylinders submitted.

*****Material Quantity**: Amount of Concrete represented by sample. Min. Schedule for Test requires one sample every 75 CY (60 m³) for structures and 50 CY (40 m³) for pavement. It is never the number of cylinders submitted.