



# Asphalt Plant, Production Site, Equipment & All HMA Constituents Inspection & Evaluation

ITD 2280 (Rev. 03-23)  
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*This inspection is to be conducted by an ITD inspector in the presence of the plant operator or manager per project.*

Key Number / District No.	Project Name	Project No.
Plant Model & Model No.	Physical Plant Location	Plant Owner
Type of Plant <input type="checkbox"/> Mobile <input type="checkbox"/> Stationary		Inspection Date
Minimum Tons Per Hour	Mid-Range Tons Per Hour	Maximum Tons Per Hour
Has Asphalt Plant had previous inspection at same location	<u>Yes</u> <input type="checkbox"/> <u>No</u> <input type="checkbox"/>	If Yes, Project Name and Inspection Date:
Remarks:		

## Weigh Systems - IR 160 Section 5

<b>Platform Scales</b>	<u>Yes</u>	<u>No</u>
Total # of Platform Scales: _____	<input type="checkbox"/>	<input type="checkbox"/>
Date of Calibration: _____	Date of Calibration: _____	
<b>Hopper Weigh System</b>	<input type="checkbox"/>	<input type="checkbox"/>
Total # of Hopper Weight Systems: _____		
Date of Calibration: _____	Date of Calibration: _____	
Provide Readable Copy of Current Registered Scale Service Calibration - <u>Attach to Inspection Report</u>		

## Storage Equipment for Asphalt Binder - IR 160 Section 6

	<u>NA</u>	<u>Yes</u>	<u>No</u>
<b>Provide Copy of the Volume / Inch Conversion Chart for AC Tank (used for this project)</b>			
Are the Binder storage tanks properly identified / numbered?		<input type="checkbox"/>	<input type="checkbox"/>
Tank # _____ PG Grade _____			
Tank # _____ PG Grade _____			
Tank # _____ PG Grade _____			
Per <b>405.03</b> , are tanks or storage material properly heated as per suppliers recommendations?		<input type="checkbox"/>	<input type="checkbox"/>
Do they meet <b>IR 160, 6.2?</b>		<input type="checkbox"/>	<input type="checkbox"/>
Provide the tank capacity (in Tons), that will be used on this project _____			
Per <b>IR 160, 6.3, IR 155</b> , does the thermometer correlate with plant recordation printouts?		<input type="checkbox"/>	<input type="checkbox"/>
Per <b>IR 160, 6.4</b> , is a sampling outlet provided between binder tank and the plant?		<input type="checkbox"/>	<input type="checkbox"/>
Is a device available for flushing the outlet prior to sampling and between circular pump and drum?		<input type="checkbox"/>	<input type="checkbox"/>
Is the anti-strip additive added on-site greater than 10 feet from anti-strip intake?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are the asphalt additives properly identified and stored, if not premixed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Brand of Anti-Strip:</b> _____			
Expiration Date of Anti-Strip: _____			
Verify percentage of Anti-Strip and recommendation from manufacturer: _____			
Is Dosage Rate tracked by computer system		<input type="checkbox"/>	<input type="checkbox"/>
Remarks:			

## Aggregate Dryer



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## Emission Controls for Dust Collector Fines - IR 160 Section 9

No. of dust collector: _____	<u>Yes</u>	<u>No</u>
How is dust returned and collected? _____		
Is the bag house or other dust collection/return system, in good working condition & maintained?	<input type="checkbox"/>	<input type="checkbox"/>
Per <b>DEQ</b> , does the plant meet applicable environmental limitations on emissions?	<input type="checkbox"/>	<input type="checkbox"/>
Permit Number: _____ Date: _____		
Remarks:		

## Surge and Storage Systems (Silos) - IR 160 Section 10

How many surge or storage bins? (Silos): _____	<u>Yes</u>	<u>No</u>
Capacity:      Bin 1:              Bin 2:              Bin 3:              Bin 4:              Bin 5:              Bin 6:		
Are Silo gates maintained and in good working order?	<input type="checkbox"/>	<input type="checkbox"/>
Do surge and storage bins (Silos) have a heated gate system?	<input type="checkbox"/>	<input type="checkbox"/>
Per <b>IR 160 10.2</b> , are Storage Silos permitted for storage?	<input type="checkbox"/>	<input type="checkbox"/>
Will the Silos be emptied completely at the end of each day of production?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:		

## Mineral Filler (P200) - IR 160 Section 11

<b>Is mineral filler required? (if no, skip the rest of the questions in this section)</b>	<u>Yes</u>	<u>No</u>
Is there a separate bin and feed system for mineral filler?	<input type="checkbox"/>	<input type="checkbox"/>
Is it accurate with in $\pm 10$ percent of the filler required by weight?	<input type="checkbox"/>	<input type="checkbox"/>
Has the mineral filler feed system been calibrated?                      If yes, date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Does it have interlocks with the aggregate feed or weigh system to maintain the correct proportions for all rates of production?	<input type="checkbox"/>	<input type="checkbox"/>
Per <b>IR 160, 11.4</b> , is there flow indicator or sensing device?	<input type="checkbox"/>	<input type="checkbox"/>
For Drum Plants, is mineral filler at least 18" inches before introduction of asphalt binder?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:		

## Hydrated Lime Treatment System - IR 160 Section 12

<b>Is hydrated lime required? (if no, skip the rest of the questions in this section)</b>	<u>Yes</u>	<u>No</u>
Is aggregate coated hydrated lime at least 18" inches before introduction of asphalt binder?	<input type="checkbox"/>	<input type="checkbox"/>
Is it accurate with in $\pm 10$ percent of the filler required by weight?	<input type="checkbox"/>	<input type="checkbox"/>
Has the Hydrated Lime Treatment System been calibrated?                      If yes, date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Are there interlocks on the aggregate feed/weigh system to maintain the correct proportions for all rates of production	<input type="checkbox"/>	<input type="checkbox"/>
Per <b>IR 160, 12.5</b> , are there flow indicators or sensing device?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:		



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## Fiber Supply System - IR 160 Section 13

	Yes	No
Is stabilizing fiber required? (if no skip rest of questions in this section)	<input type="checkbox"/>	<input type="checkbox"/>
Is there a separate bin and feed system for fiber?	<input type="checkbox"/>	<input type="checkbox"/>
Is it accurate within $\pm 10$ percent of the filler required by weight?	<input type="checkbox"/>	<input type="checkbox"/>
Is the fiber supply system calibrated? If yes, date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Is there a digital display of output of feed rate, for verification of feed rate?	<input type="checkbox"/>	<input type="checkbox"/>
Are there interlocks with the aggregate feed/weigh system?	<input type="checkbox"/>	<input type="checkbox"/>
For drum plants, is fiber uniformly dispersed prior to injection of asphalt binder?	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:		

## Calibration of Plant Equipment - IR 160 Section 14 (IR 155)

<u>Is the Scale(s) Calibrated</u>				Yes	No	Date
Type of scale/number:	_____			<input type="checkbox"/>	<input type="checkbox"/>	_____
Type of scale/number:	_____			<input type="checkbox"/>	<input type="checkbox"/>	_____
Type of scale/number:	_____			<input type="checkbox"/>	<input type="checkbox"/>	_____
Type of scale/number:	_____			<input type="checkbox"/>	<input type="checkbox"/>	_____
		Tons/Hour _____	Tons/Hour _____			
<b>per IR 155, Cold Feed Bin Verification within <math>\pm 0.1\%</math>?</b>		<b>High Range</b>	<b>Low Range</b>			
		Yes	No	Yes	No	Date
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Bin	Number: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is the total belt scale weight within $\pm 0.5\%$ , <b>IR 155</b> Mid-range within $\pm 0.1\%$ ?				<input type="checkbox"/>	<input type="checkbox"/>	
Bin Number: _____ Tons/Hour: _____				<input type="checkbox"/>	<input type="checkbox"/>	
Bin Number: _____ Date _____ Verification Date _____				<input type="checkbox"/>	<input type="checkbox"/>	
Per <b>IR 155</b> , total belt scale weight within $\pm 0.5\%$ , verified by Dept? _____				<input type="checkbox"/>	<input type="checkbox"/>	
Asphalt meter accuracy within $\pm 0.5\%$ of metered quantity to weight quantity?				<input type="checkbox"/>	<input type="checkbox"/>	
Print out of plant calibration accurate?				<input type="checkbox"/>	<input type="checkbox"/>	
Verified belt scales or cold feeder?				<input type="checkbox"/>	<input type="checkbox"/>	
Remarks:						

## Thermometric Equipment IR 160 Section 15

	Yes	No	Date
Is the plant equipped with recording thermometer for Binder storage tanks?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is the plant equipped with recording temperature of dryer or pug mill?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are the thermometer calibrations records current? Last calibration date: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Remarks:			



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### Plant Laboratory and Plant QCP - IR 160 Section 16, 17, 18, 19

Plant QC Testing Laboratory Qualification Number & Location: _____	<u>Yes</u>	<u>No</u>
Is there a current and approved Hot Plant Quality Control Plan in place	Date Approved: _____	<input type="checkbox"/> <input type="checkbox"/>
Remarks:		

### Safety and Inspection Provisions

Are sampling locations safe and convenient for technicians	<u>Yes</u>	<u>No</u>
Is the asphalt plant in complete compliance with OSHA / MSHA latest inspections	<input type="checkbox"/>	<input type="checkbox"/>
Remarks:		

### Conclusion

Remarks or Notes Pertaining to Inspection or Evaluation:		
Inspected By:	Position Title:	Inspection Date
Asphalt Plant Representative:	Position Title:	Inspection Date
Date Reviewed	Resident Engineer or Project Manager / District No.	