## READY MIX CONCRETE PRODUCER APPROVAL APPLICATION

Company Name	
Ac	Idress
(IF	MORE THAN ONE; i.e., Regional Offices, etc., PLEASE ATTACH LIST AND AREA COVERED.)
1.	Are copies of current applicable specifications, aggregate testing IMs and source information data available at the respective sources or testing facilities? (Y or N ) If No, explain.
2.	Are the project diaries maintained on a daily basis and available for inspection? (Yor No) If No, explain.
3.	Who (position) is responsible for production notification to the Plant Monitor?
4.	Which company representative (position) is normally responsible for daily overall Quality Control processes at the plant?
5.	Describe the stockpile identification system in place at each plant.
6.	Attach a detailed summary of your Quality Control Program. (NOTE: Refer to Guidelines for Required Ready Mix Producer Quality Control Program.)
7.	Attach a flow chart of your current Quality Control structure (Include names, addresses, phone numbers of appropriate management personnel, chain of command, etc., for problem resolution).
	dicate the lowa DOT District(s) for which you have operations to produce State of Iowa Certified aterial.
	1 2 3 4 5 6
ΑL	JTHORIZED SIGNATURE DATE
D۱	ME RECOMMENDATIONS
DN AF	ME SIGNATURE DATEPROVAL (YES or NO) REMARKS
CE	ENTRAL CONSTR. & MAT'LS SIGNATURE DATE