

**CERTIFICATION
FOR PROFILE WALL HDPE LINER PIPE**

This certifies the Profile Wall HDPE Liner Pipe, _____ ,
(Product Trade Name)

of _____ nominal diameter, manufactured by _____
(size) (Manufacturer Name)

at _____
(Plant location, City & State)

is in accordance with the Indiana Department of Transportation Standard Specifications and ASTM F 894.
This material is to be used for and by the following and is substantiated by the test results included herein.

Contract Number _____ Contractor Name _____

Identifying Print Line Information _____

or Lot Number _____

Material Destination (if other than contract location) _____

Test	Method	Specification Limits	Test Results
Resin Density	ASTM D 3350	0.940, minimum	
Resin Melt Index	ASTM D 3350 Condition (190, 2.16)	0.4, maximum	
RSC*	ASTM F 894 @ 3% Deflection	160 minimum for circular installations, 250 minimum for deformed installations	
ID	ASTM F 894		
Wall Thickness (Pipe)	ASTM F 894		
Wall Thickness (Bell)	ASTM F 894		
Wall Thickness (Spigot)	ASTM F 894		
Flattening	ASTM F 894	Pass	
Length	ASTM F 894	±2 in. of specified or nominal length	

*In lieu of RSC, the PS (in accordance with ASTM F 894, X1) may be reported, provided the adjustment factor, C, in accordance with ASTM D 2412 and the mean diameter, D, are also reported.

** These values vary depending on the pipe size. Contractor shall include the appropriate value from ASTM.

Joint Type (Circle one): Bell/Spigot Screw Type Grooved Press-On Butt Fused Ext. Welded

Other (specify) _____

(Date) (Signature of Manufacturer's Representative) (Title)

**CERTIFICATION
FOR SOLID WALL HDPE LINER PIPE**

This certifies the Solid Wall HDPE Liner Pipe, _____,
(Product Trade Name)

of _____ nominal diameter, manufactured by _____
(size) (Manufacturer Name)

at _____
(Plant location, City & State)

is in accordance with the Indiana Department of Transportation Standard Specifications and AASHTO M 326 or ASTM F 714. This material is to be used for and by the following and is substantiated by the test results included herein.

Contract Number _____ Contractor Name _____

Identifying Print Line Information _____

or Lot Number _____

Material Destination (if other than contract location) _____

Test	Method	Specification Limits	Test Results
Resin Density	ASTM D 3350	0.940 – 0.955	
Resin Melt Index	ASTM D 3350 Condition (190, 2.16)	0.15, maximum	
Liner OD	AASHTO M 326		
Liner Wall Thickness or ID	AASHTO M 326	Nominal OD, in in., divided by 32.5, minimum (For 12 in. use 12.750 in. and for 13 in., use 13.375 in.) Given ID, subtract from OD provided and divide by 2 to determine wall thickness, then use spec above	
Liner DR (Actual Calculated)	AASHTO M 326	30.0, minimum	
Length	AASHTO M 326	minimum of 99% of specified length, or 1/2 in. less than specified length, whichever is shorter	

* These values vary depending on the pipe size. Contractor shall include the appropriate value from AASHTO.

Joint Type (Circle one): Bell/Spigot Screw Type Grooved Press-On Butt Fused Ext. Welded

Other (specify) _____

(Date) (Signature of Manufacturer's Representative) (Title)