



**PILE AND DRIVING EQUIPMENT DATA FORM**

Des No.: \_\_\_\_\_ Structure Name and/or No.: \_\_\_\_\_

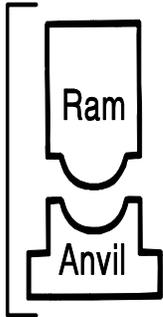
Contract No.: \_\_\_\_\_

Project: \_\_\_\_\_ Pile Driving Contractor or Subcontractor: \_\_\_\_\_

\_\_\_\_\_ Piles driven by (Name): \_\_\_\_\_

County: \_\_\_\_\_ Values on this form are in: English Metric units

Hammer Components



**Hammer**

Manufacturer: \_\_\_\_\_ Model No.: \_\_\_\_\_  
 Hammer Type: \_\_\_\_\_ Serial No.: \_\_\_\_\_  
 Manufacturer's Maximum Rated Energy: \_\_\_\_\_ ft-lbs (Joules)  
 Stroke at Maximum Rated Energy: \_\_\_\_\_ ft (meters)  
 Range in Operating Energy: \_\_\_\_\_ to \_\_\_\_\_ ft-lbs (Joules)  
 Range in Operating Stroke: \_\_\_\_\_ to \_\_\_\_\_ ft (meters)  
 Ram Weight: \_\_\_\_\_ kips (kg)  
 Modifications: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



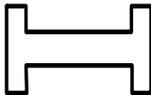
**Striker Plate**

Weight: \_\_\_\_\_ kips (kN) Diameter: \_\_\_\_\_ in. (mm)  
 Thickness: \_\_\_\_\_ in. (mm)



**Hammer Cushion**

Material #1 Material #2 (for composite cushion)  
 Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Area: \_\_\_\_\_ in.<sup>2</sup> (cm<sup>2</sup>) Area: \_\_\_\_\_ in.<sup>2</sup> (cm<sup>2</sup>)  
 Thickness/Plate: \_\_\_\_\_ in. (mm) Thickness/Plate: \_\_\_\_\_ in. (mm)  
 No. of Plates: \_\_\_\_\_ No. of Plates: \_\_\_\_\_  
 Total Thickness of Hammer Cushion: \_\_\_\_\_ in. (mm)



**Helmet (Drive Head)**

Weight: \_\_\_\_\_ including inserts, kips (kN)



**Pile Cushion**

Pile Cushion Material: \_\_\_\_\_  
 Area: \_\_\_\_\_ in.<sup>2</sup> (cm<sup>2</sup>) Thickness/Sheet: \_\_\_\_\_ in. (mm)  
 No. of Sheets: \_\_\_\_\_  
 Total Thickness of Pile Cushion: \_\_\_\_\_ in. (mm)



**Pile**

Pile Type: \_\_\_\_\_  
 Wall Thickness: \_\_\_\_\_ in. (mm) Taper: \_\_\_\_\_  
 Cross Sectional Area: \_\_\_\_\_ in.<sup>2</sup> (cm<sup>2</sup>) Weight/ft (m): \_\_\_\_\_  
 Ordered Length: \_\_\_\_\_ ft (m)  
 Factored Design Soil Resistance, per pile: \_\_\_\_\_ kips (kN)  
 Nominal Driving Resistance: \_\_\_\_\_ kips (kN)  
 Driving Shoe/Closure Plate Description: \_\_\_\_\_  
 \_\_\_\_\_

Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

INDOT PE/S: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Email Address: \_\_\_\_\_