REPORT OF WIM MAINTENANCE

Clear

Date: _____

Technician: _____   Phone: _____

Site Information:

Site ID: _____0_____
Route: _____   Milepost: _____
Latitude: _____   Longitude: _____

WIM System:

Controller Type: _____   Firmware: _____
Sensor Type: _____
Sensor Configuration: _____

Type of Maintenance:

Description of Maintenance Performed:

Parts Used:

Description	Part#	Number

Was repair successful?

Are further actions required?   ☐ **Urgent (no data being collected)**

If yes, please provide additional information below: