



PREAPPROVED MATERIALS LIST

YELLOW SHEETS

PREQUALIFIED PRODUCTS AND SUBMITTALS FOR QUALIFICATION OF STREETLIGHT EQUIPMENT AND RELATED MATERIALS

PROJECT MANAGER: _____

PROJECT: _____

CONTRACT NO.: _____

**SUBMITTING
CONTRACTOR:** _____

DATE SUBMITTED: _____

**CONTRACTOR
REPRESENTATIVE:** _____

PHONE: _____

‘YELLOW SHEETS’ INSTRUCTIONS

These sheets serve two purposes:

1. They are a list of pre-approved and preferred streetlight equipment and materials that can be installed in Gresham by developers.
2. For a City project, these sheets are to be submitted by the Contractor to submit a list of equipment and materials for City approval, and for the City to track what equipment and materials are installed for a project.

A PDF version (not fillable) of these sheets can be found on the City of Gresham’s Internet site. They will be provided by the Project Manager or Development Engineer for each project, to ensure that the most current copy is used.

These sheets are not all inclusive of materials required on City of Gresham projects.

INITIAL SUBMITTAL

The Developer/Contractor will fill out the Yellow Sheets CONTENTS Page based on project requirements:

1. On the three CONTENTS pages, check the box for each item that is “On Project”.
2. **Any products listed** on the specific item pages may be used.
3. If Developer/Contractor wishes to use **any Write In** products (not listed on the specific item pages):
 - a. Write in Brand/Manufacturer and Catalog/Part Number in the space provided on each page.
 - b. Attach catalog cut sheets to the Yellow Sheets when returning them to the City Development Engineer/Project Manager.
 - c. Wait for Development Engineer/Project Manager approval or rejection of the Write In product.
4. **Do NOT check off any products** on the specific item pages (this will be done by the Signals Inspector during Construction/installation)
5. These Yellow Sheets incorporate ODOT’s list of items and materials that are subject to the Buy America, Build America Act. If the project has federal funding, submit a Certificate of Materials Origin (CMO) form (ODOT 734-2126) for each product or material that requires one at the time of Yellow Sheets submittal. Preapproved products listed in these Yellow Sheets do NOT necessarily meet the requirements of the Buy America, Build America Act.
6. Return the Yellow Sheets with CONTENTS pages filled out and any Write In items to the City Development Engineer/Project Manager.

The City Signals Inspector will:

1. Review the submitted Yellow Sheets for errors and omissions and work with Developer/Contractor to correct them if necessary.
2. Submit **Write In** products to the Traffic Signal Engineer for approval.
3. Once Write In products are approved, notify Developer/Contractor that the Yellow Sheets are approved.

CONSTRUCTION

Materials delivered to the job site shall be **clearly marked** as to brand and model/part description (verified on materials) or shall be accompanied by supplier’s certification as to brand and model/part description (copy attached).

The Developer/Contractor will:

1. Install listed preapproved products and materials or approved Write In products ONLY. Install per plan and specification.
2. **If the project has federal funding, Developer/Contractor must provide all required CMOs prior to the products or materials being installed.** Developer/Contractor shall submit the required CMOs for materials and products at the time of Yellow Sheets submittal if the product to be installed is known.

The City Inspector will:

1. Print a paper copy of approved Yellow Sheets.
2. Verify and document that installed materials match preapproved materials and are installed per plan and specification. Check off box for each product installed. For CMOs received prior to installation, check CMO box and write date received.
3. Document inspection/installation details as necessary on each specific materials page.
4. When each specific item has been entirely inspected and accepted on the project, fill out the "CTSI Inspected & Accepted" info on that item’s page.

CONTENTS

PAGE NO.	ON PROJECT
---------------------	-----------------------

STREETLIGHT POLES, ARMS, AND FOUNDATIONS

- | | |
|-------------------------|--------------------------|
| 4. FIBERGLASS POLES | <input type="checkbox"/> |
| 5. DECORATIVE POLES | <input type="checkbox"/> |
| 6. ALUMINUM DAVIT POLES | <input type="checkbox"/> |
| 7. WOOD POLE MAST ARMS | <input type="checkbox"/> |
| 8. POLE FOOTINGS | <input type="checkbox"/> |

LUMINAIRE FIXTURES

- | | |
|---|--------------------------|
| 9. LED COBRA HEAD LIGHT FIXTURES | <input type="checkbox"/> |
| 10. DECORATIVE LIGHT FIXTURES | <input type="checkbox"/> |
| 11. PHOTOELECTRIC CELLS AND SHORTING CAPS | <input type="checkbox"/> |

WIRING AND ELECTRICAL SERVICE

- | | |
|--------------------------|--------------------------|
| 12. IN-LINE FUSE HOLDERS | <input type="checkbox"/> |
| 13. WIRE CONNECTORS | <input type="checkbox"/> |
| 14. SERVICE PEDESTALS | <input type="checkbox"/> |

CONDUIT & APPURTENANCES

- | | |
|------------------------------|--------------------------|
| 15. CONDUIT (METALLIC) | <input type="checkbox"/> |
| 16. CONDUIT (NON-METALLIC) | <input type="checkbox"/> |
| 17. CONDUIT BUSHINGS | <input type="checkbox"/> |
| 18. CONDUIT PLUG | <input type="checkbox"/> |
| 19. PULL LINE | <input type="checkbox"/> |
| 20. UNDERGROUND WARNING TAPE | <input type="checkbox"/> |

JUNCTION BOX

- | | |
|---|--------------------------|
| 21. JUNCTION BOXES (CONCRETE, POLYMER CONCRETE, & HYBRID) | <input type="checkbox"/> |
|---|--------------------------|

CABLES, WIRES, GROUNDING & BONDING

- | | |
|-----------------------------|--------------------------|
| 22. BOND WIRE | <input type="checkbox"/> |
| 23. GROUND ROD & CLAMP | <input type="checkbox"/> |
| 24. XHHW WIRE | <input type="checkbox"/> |
| 25. CABLE WIRE | <input type="checkbox"/> |
| 26. OVERHEAD WIRE EQUIPMENT | <input type="checkbox"/> |

INITIAL SUBMITTAL

☐ **AGREE WITH "ON PROJECT"**

☐ **RETURNED FOR CORRECTION**

Date: _____

Name: _____

CTSI Card# _____

Qualifications or corrections are subject to all requirements of the current issue of the Standard Specifications for Highway Construction as modified by the Project Special Provisions.

Fiberglass Poles

Approved Products:

Pole Stub Piece

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Shakespeare	BHS3099N3BL9901
<input type="checkbox"/> Alliance Composites	DS6STUB-30
<input type="checkbox"/> CMT	25-STUB-UP

Pole Top Piece

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Shakespeare	BHT3099S2BL9901
<input type="checkbox"/> Alliance Composites	DST30GSDN1
<input type="checkbox"/> CMT	MDS30-F-100-S1-HS-PC-NP-1B-22

8-Inch Mast Arms (Bronze)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Shakespeare	OPAR-0.7-PGE-BR
<input type="checkbox"/> Valmont	1HS23808B475
<input type="checkbox"/> Whatley	SB8-2DDB

6-Foot Mast Arms

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Shakespeare	OPAR-6
<input type="checkbox"/> Valmont	1MA0632B475 W/HARDWARE
<input type="checkbox"/> Whatley	MA-72

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Decorative Poles

Approved Products:

Acorn Light Poles (16 Foot)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Continental Pole	PGE-16
<input type="checkbox"/> Hadco	P-2065-16-A
<input type="checkbox"/> Amerlux Exterior LLC	D1305-16/BLK-PGE-GBL
<input type="checkbox"/> Hapco	77920L24PGE
<input type="checkbox"/> Holophane	WDA 16 F5J 17D C03 BK LAB
<input type="checkbox"/> Valmont	160050506UW

Acorn Light Poles (14 Foot)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Continental Pole	PGE-14
<input type="checkbox"/> Hadco/Signify	P-2065-14-A
<input type="checkbox"/> Amerlux Exterior LLC	D1305-14/BLK-PGE-GBL
<input type="checkbox"/> Hapco	77920PGE
<input type="checkbox"/> Holophane	WDA 14 F5J 17D C03 BK LAB
<input type="checkbox"/> Valmont	140050506UW

Pendant Light Poles

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Philips Hadco	CP0606-18A-HFP3

Pendant Light Arms

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Philips Hadco	CA0606D-310-P4APM

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

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Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

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Aluminum Davit Poles

Approved Products:

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Valmont	3500-86106D4Z-SBF-11"BC
<input type="checkbox"/> Hapco	41-231PGE
<input type="checkbox"/> P&K Poles (Flagpole Inc.)	RTA8M35AAD1632D

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

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Name: _____

CTSI Card# _____

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Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
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Quantity accepted _____

Quantity rejected _____

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Steel Mast Arms for Wood Poles

Approved Products:

4-Foot Steel Mast Arms

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Valmont	ACSC 125-040
<input type="checkbox"/> SALCO	WP-125-4-S
<input type="checkbox"/> Maclean Power Systems	S-125-4G

6-Foot Steel Mast Arms

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> SALCO	WP-125-6-S
<input type="checkbox"/> Maclean Power Systems	S-125-6G

8-Foot Steel Mast Arms

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> SALCO	WPSG-125-8-S-PGE
<input type="checkbox"/> Maclean Power Systems	S-125-8SG-30R

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

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Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Pole Footings

Approved Products:

Footings for 25- to 35-Foot Poles**Brand/Manufacturer** **Catalog/Part No.**☐ Oldcastle 5CL-LB-PGE**Footings for Decorative Poles****Brand/Manufacturer** **Catalog/Part No.**☐ Oldcastle 20R-LB-4-PGE**Write-In Items (Attach Cut Sheets)****Brand/Manufacturer** **Catalog/Part No.**
☐ _____
☐ _____
INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
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Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

LED Cobra Head Light Fixtures

Approved Products:

Extra-Small Cobra Head Low Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCJ1-30J-MV-40K-2R-GY-025-WL	17

Extra-Small Cobra Head Medium Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCJ1-30J-MV-40K-2R-GY-045-WL	27

Extra-Small Cobra Head High Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCJ1-30J-MV-40K-2R-GY-050-WL	30

Small Cobra Head High Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCJ2-30J-MV-40K-3R-GY-070-WL	44

Medium Cobra Head Medium Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCJ3-30J-MV-40K-3F-GY-085-WL	58

Large Cobra Head Extra-Low Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCM1-60J-MV-40K-3F-GY-095-WL	59

Large Cobra Head Extra-High Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCM1-60J-MV-40K-3F-GY-135-WL	85

Extra-Large Cobra Head High Wattage

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Leotek Electronics	GCL1-80J-MV-40K-3F-GY-230-WL	153

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Decorative Light Fixtures

Approved Products:

Acorn Lights

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> King Luminaire	K118R-B3AR-IV-75(SSL)-1036- 120:227-K18-SST-PR7-3000K	75

Pendant Lights

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> Cyclone Lighting	SY21P1-FGC-3-60W-3K- 120-PT-SD-BK-TX	60

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>	<u>Watts</u>
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____
<input type="checkbox"/> _____	_____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Photoelectric Cells and Shorting Caps

Approved Products:

Photocell

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Intermatic	LED4536SC
<input type="checkbox"/> Ripley	6390LL-BK

Twist-Lock Receptacle

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Intermatic	K122

Shorting Cap

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Dayton	26WA88
<input type="checkbox"/> Intermatic	K4500
<input type="checkbox"/> Ripley	6005

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

In-line Fuse Holder

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***120V/240V System**

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Ideal	30-S1212
<input type="checkbox"/> Ideal - SLK	30-S1212D
<input type="checkbox"/> Littelfuse	LEC-JJ-S
<input type="checkbox"/> Littelfuse	LEY-JJ-S
<input type="checkbox"/> Cooper Bussmann	HEX-JJ
<input type="checkbox"/> Littelfuse	LEX-JJ
<input type="checkbox"/> Ideal - SLK	30-S2222
<input type="checkbox"/> Mersen	FEX-81-81-BA

120V only System

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Ideal	30-S1212
<input type="checkbox"/> Ideal	30-S1212P
<input type="checkbox"/> Littelfuse	LEC-JJ-S
<input type="checkbox"/> Littelfuse	LEY-JJ-S
<input type="checkbox"/> Cooper Bussmann	HEB-JJ
<input type="checkbox"/> Littelfuse	LEB-JJ

KTK 10A Fuse

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Cooper Bussmann	Limitron KTK-10
<input type="checkbox"/> Mersen	OTM-10
<input type="checkbox"/> Mersen	ATM-10

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

WIRE CONNECTORS

Approved Products:

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Ideal WeatherProof®	Model 61® Gray/Orange
<input type="checkbox"/> Ideal WeatherProof®	Model 62® Gray/Red
<input type="checkbox"/> Ideal WeatherProof®	Model 63® Gray/Dk. Blue
<input type="checkbox"/> Ideal UnderGround®	Model 60® Gray/Gray
<input type="checkbox"/> Ideal UnderGround®	Model 64® Gray/Dk. Blue
<input type="checkbox"/> Ideal UnderGround®	Model 66® Gray/Dk. Blue

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Service Pedestals

Approved Products:

Pedestals

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Cooper B-line	CUP4111
<input type="checkbox"/> Milbank	CP3B-E (100A)

Riser Frame

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Cooper B-line	MB1515

Write-In Items (Attach Cut Sheets)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Conduit (Non-metallic)

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***PVC**

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> PW Pipe	Sch. 40 & 80
<input type="checkbox"/> Carlon/Prime Conduit	Sch. 40 & 80
<input type="checkbox"/> Cantex	Sch. 40
<input type="checkbox"/> J-M Manufacturing	Sch. 40 & 80
<input type="checkbox"/> Kraloy	Sch. 40
<input type="checkbox"/> Ipex/Scepter	Sch. 40
<input type="checkbox"/> Cresline Northwest	Sch. 40
<input type="checkbox"/> Ridgeline	Sch. 40
<input type="checkbox"/> Heritage Plastics Central	Sch. 40
<input type="checkbox"/> Rocky Mountain Colby Pipe	Sch. 40 & 80
<input type="checkbox"/> Allied-Heritage	Sch. 40 & 80
<input type="checkbox"/> Raceways Technology & Manufacturing	Sch. 40 & 80

HDPE

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Carlon	Sch. 40 & 80
<input type="checkbox"/> Arnco/Dura-Line	Sch. 40 & 80
<input type="checkbox"/> PERMA-GUARD	Sch. 40 & 80

Fiberglass

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Champion Fiberglass	Sch. 40 & 80
<input type="checkbox"/> FRE Composites	Sch. 40 & 80
<input type="checkbox"/> United Fiberglass of America	Sch. 40 & 80
<input type="checkbox"/> Raceways Technology & Manufacturing	Sch. 40 & 80

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Conduit (Metallic)

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***Rigid****Brand/Manufacturer** **Catalog/Part No.**

No products listed yet, use "Write-In Items" section below.

Liquid-Tight Flexible**Brand/Manufacturer** **Catalog/Part No.**

No products listed yet, use "Write-In Items" section below.

Write-In Items Must Be Preapproved (Attach Cut Sheets):**Brand/Manufacturer** **Catalog/Part No.**

<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	_____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Conduit Bushings

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***Non-Metallic**

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Cantex	#5144005 thru 5144010
<input type="checkbox"/> PW Pipe	#6150-0200 #6150-300
<input type="checkbox"/> Kraloy	#MEB05-MEB40

Metallic

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
----------------------------------	--------------------------------

No products listed yet, use "Write-In Items" section below.

Metallic (Bonded)

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
----------------------------------	--------------------------------

No products listed yet, use "Write-In Items" section below.

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Conduit Plug

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***Brand/Manufacturer** **Catalog/Part No.**☐ Lantz Electric "Foam Factory"Write-In Items Must Be Preapproved (Attach Cut Sheets):**Brand/Manufacturer** **Catalog/Part No.**☐ _____☐ _____**INSPECTED & ACCEPTED ON PROJECT**

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

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Pull Line

Approved Products:

Inspector to check box next to all materials incorporated into project and verified.

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Greenlee	polypro 3/8"
<input type="checkbox"/> Garvin Industries	PT-1250
<input type="checkbox"/> Dottie	3800 Series
<input type="checkbox"/> Ideal Industries	31-844 thru 31-846

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

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Name: _____

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☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

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Underground Warning Tape

Approved Products:

Inspector to check box next to all materials incorporated into project and verified.

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Dottie	UT-29D
<input type="checkbox"/> Ideal	#42-151
<input type="checkbox"/> Reef Industries	Standard 250
<input type="checkbox"/> Cully	UG Burial Tape
<input type="checkbox"/> Harris	UT-29

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

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☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

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Junction Box (Concrete, Polymer Concrete, & Hybrid)

Approved Products:

*Inspector to check box next to all materials incorporated into project and verified.***JB-1**

Brand/Manufacturer	Catalog/Part No.
<input type="checkbox"/> ARMORCAST	A6001425TA
<input type="checkbox"/> ARMORCAST	A6000485TAX12
<input type="checkbox"/> CDR	SA20101512
<input type="checkbox"/> Quazite	PG1118BA12 w/PG1118HA lid
<input type="checkbox"/> Oldcastle	H1118-12 w/ Poly Tier 15 Lid
<input type="checkbox"/> Newbasis	PCA111812-90011/90012
<input type="checkbox"/> Martin Enterprises	111812PC Tier 22
<input type="checkbox"/> Oldcastle	S1118B12AA w/S1118HBBOA Lid
<input type="checkbox"/> Oldcastle (Duralite Max)	11182575
<input type="checkbox"/> Channell	BULKU111812

JB-2

Brand/Manufacturer	Catalog/Part No.
<input type="checkbox"/> ARMORCAST	A6001946TAPCX12
<input type="checkbox"/> CDR	SA20132412
<input type="checkbox"/> Quazite	PG1324BA12 w/PG1324HA lid
<input type="checkbox"/> Oldcastle	H1324-12 w/ Poly Tier 15 Lid
<input type="checkbox"/> Newbasis	PCA132412-90030/90031
<input type="checkbox"/> Martin Enterprises	122012PC Tier 22
<input type="checkbox"/> Jensen Precast	HPC1324-12
<input type="checkbox"/> Oldcastle	S1324B12AA w/S1324HBBOA Lid
<input type="checkbox"/> Newbasis	FCA132412T-90013
<input type="checkbox"/> Newbasis	FCA132412T-00150
<input type="checkbox"/> Oldcastle (Duralite)	132412DL
<input type="checkbox"/> Channell	BULKU132412

JB-3

Brand/Manufacturer	Catalog/Part No.
<input type="checkbox"/> ARMORCAST	A6001640TAPCX12
<input type="checkbox"/> CDR	SA20173012
<input type="checkbox"/> Quazite	PG1730BA12 w/ PG1730HA lid
<input type="checkbox"/> Oldcastle	H1730-12 w/ Poly Tier 15 Lid
<input type="checkbox"/> Newbasis	PCA173012-90015/90016
<input type="checkbox"/> Martin Enterprises	173012PC Tier 22
<input type="checkbox"/> Jensen Precast	HPC1730-12
<input type="checkbox"/> Oldcastle	S1730B12AA w/S1730HBBOA Lid
<input type="checkbox"/> Newbasis	FCA173012T-90007
<input type="checkbox"/> Newbasis	FCA173012T-00294
<input type="checkbox"/> Oldcastle (Duralite)	173012DL
<input type="checkbox"/> Channell	BULKU173012

Write-In Items Must Be Preapproved (Attach Cut Sheets):

Brand/Manufacturer	Catalog/Part No.
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

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Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

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Bond Wire

Approved Products:

Inspector to check box next to all materials incorporated into project and verified.

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Republic Wire (Anixter)	#6 AWG 7 Strand
<input type="checkbox"/> General Cable (Anixter)	#6 AWG 7 Strand
<input type="checkbox"/> Rome (Anixter)	#6 AWG 7 Strand
<input type="checkbox"/> Superior Essex	#6 AWG 7 Strand
<input type="checkbox"/> Southwire	#6 AWG 7 Strand
<input type="checkbox"/> Encore	#6 AWG 7 Strand
<input type="checkbox"/> Nehring	#6 AWG 7 Strand
<input type="checkbox"/> Service Wire Co	#6 AWG 7 Strand

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

Ground Rod & Clamp

Approved Products:

Ground Rod

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Thomas & Betts (Blackburn)	6258
<input type="checkbox"/> Eritech	615880
<input type="checkbox"/> PP Porcelain Products	8438
<input type="checkbox"/> Petron Pacific	5/8"
<input type="checkbox"/> Hubbell/Chance	C615855

Clamp

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Thomas & Betts (Blackburn)	JAB58H
<input type="checkbox"/> Burndy	GRC58
<input type="checkbox"/> PENN-UNION	CAB or CEB
<input type="checkbox"/> PP Porcelain Products	8058
<input type="checkbox"/> Eritech	HDC58
<input type="checkbox"/> ILSCO	C6RC58

Chemical Ground System

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Tessco	n/a
<input type="checkbox"/> Superior Grounding Systems	n/a
<input type="checkbox"/> Erico	n/a

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:**CMO REQUIRED** if project is federally funded☐ Received Date: _____*Project Manager to complete after CMO is submitted*

XHHW Wire

ONLY XHHW WIRE IS PERMITTED ON GRESHAM / MULTNOMAH COUNTY JOBS.

Approved Products:

Inspector to check box next to all materials incorporated into project and verified.

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Rome Cable (Anixter)	WIRE
<input type="checkbox"/> General Cable (Anixter)	MUST
<input type="checkbox"/> Southwire	BE
<input type="checkbox"/> Encore Wire	MARKED
<input type="checkbox"/> Service Wire Co	ADDITIONAL
<input type="checkbox"/> Kris Tech (KT) Wire	MARKINGS
<input type="checkbox"/> Advanced Digital Cable	ALLOWED
<input type="checkbox"/> Cerrowire	
<input type="checkbox"/> CME Wire	

Write-In Items Must Be Preapproved (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or Supplier's Certification (Copy Attached)

Quantity accepted _____

Quantity rejected _____

REMARKS:

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☐ Received Date: _____

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TC Cable Wire

**3-CONDUCTOR, 7 STRAND, MINIMUM #10 AWG.
CABLE WIRE IS STRANDED COPPER CONDUCTOR
WITH CROSS LINKED POLYETHYLENE INSULATION.
ONLY XHHW WIRE IS PERMITTED ON GRESHAM
JOBS. NO TFFN OR THWN WIRE WILL BE ACCEPTED.**

Approved Products:

Approved Products:

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> Rome Cable (Anixter)	WIRE
<input type="checkbox"/> General Cable (Anixter)	MUST
<input type="checkbox"/> Southwire	BE
<input type="checkbox"/> Encore Wire	MARKED
<input type="checkbox"/> Service Wire Co	ADDL
<input type="checkbox"/> Kris Tech (KT) Wire	MARKINGS
<input type="checkbox"/> Lake Cable	ALLOWED
<input type="checkbox"/> Nexans	

Write-In Items (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
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Quantity accepted _____

Quantity rejected _____

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Overhead Wire Equipment

Approved Products:

Wedge Grip Clamps

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> PCC Insulators	1061F
<input type="checkbox"/> PCC Insulators	1062F
<input type="checkbox"/> PCC Insulators	1063F

Write-In Items (Attach Cut Sheets):

<u>Brand/Manufacturer</u>	<u>Catalog/Part No.</u>
<input type="checkbox"/> _____	_____
<input type="checkbox"/> _____	_____

INSPECTED & ACCEPTED ON PROJECT

Date: _____

Name: _____

CTSI Card# _____

☐ Verified Materials by Markings/Packaging

Quantity accepted _____

Quantity rejected _____

☐ Verified Materials by Manufacturer's or
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Quantity rejected _____

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