

TUNNEL RECONNAISSANCE REPORT

For use of this form, see FH 9-58, the attached agency to TRACE.

DATE

TO: (Inspector's agency routing device)

FROM: (Name, grade and unit of reconnaissance officer)

1. ROUTE OR LINE

2. FROM (Start Point)

3. TO (End Point)

4. DATE/TIME OF
REPORT

HIGHWAY

TRAIL ROAD

5. MAP SHEET NO.

6. SHEET NUMBER

7. ONE WAY

8. TUNNEL NUMBER

TYPE

COORDINATES

9. LOCATION FROM NEAREST TOWN

10. TYPE (Suburban, Park, etc.)

DISTANCE

DIRECTION

NAME OF NEAREST TOWN

11. NAME (Mason or Team name)

12. LENGTH

13. NUMBER OF
STACKS

14. RELATION WITH

15. CLEARANCE

16. GRADE (feet)

17. ALIGNMENT (Single or multiple lanes)

VERTICAL

HORIZONTAL

18. WIDTH (feet)

19. PORTALS (square)

20. VENTILATION (type)

21. STORAGE

22. DAMAGED FOR DEMOLITION

 YES NO23. CLOSURE
REASON

24. CONDITION (check appropriate box)

 EXCELLENT GOOD FAIR POOR

25. BYPASSABILITY

26. ALTERNATE CROSSING

27. APPROACHES

28. IN-TUNNEL RESTRICTIONS

29. SURVEY DATA