

State of Alaska
Alaska Department of Transportation & Public Facilities

Scale Diary (Form 25D-054)

Date: _____ Item Number: _____ Source: _____

Scale Location: _____

Time scale balanced: _____

Scales opened: _____ Scales closed: _____

First ticket number: _____ Last ticket number: _____

Haul started: _____ Haul stopped: _____

Void ticket numbers: _____

Truck Number	Ticket Number	Time	Tare Weight

Remarks: _____

Scaleman: _____