



pennsylvania
DEPARTMENT OF TRANSPORTATION

www.dot.state.pa.us

July 13, 2009

Ms. Gena Peters
Salit Specialty Rebar
3235 Lockport Road
Niagara Falls, NY 14305

Re: PEQ# 2008-178
Fabricated Stainless Steel Reinforcement Bar
Supplier Code: (SALSR)
Corrected Copy

Dear Ms. Peters:

We have completed our evaluation of **Fabricated Stainless Steel Reinforcement Bar**, fabricated by Salit Specialty Rebar, and you have been approved for listing in Bulletin #15, Approved Construction Materials in **Section 709.1 Reinforcement Steel** as a **fabricator of Stainless Steel Reinforcement Bar**. This letter may be used as proof of approval until Salit Specialty Rebar appears in Bulletin #15.

It is mandatory that a "Certification of Compliance", Form CS-4171, be accurately completed and distributed as directed for all approved products shipped to our projects. Form CS-4171 is attached and may be duplicated as needed, or accessed on the PennDOT web site: '<http://www.dot.state.pa.us/>'. Click on Forms, Publications, & Maps then select PennDOT Sales Store, and go to the index of Publication 35, Bulletin 15 "Approved Construction Materials".

All products approved by the Pennsylvania Department of Transportation are subject to periodic inspection by our Quality Assurance Division.

Any changes to the company name, plant location, material suppliers, manufacturing process, etc., that may occur relative to this product, must be reported to this office within ten (10) days. If changes are not reported within the required time, your product will be subject to removal from Bulletin #15.

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If you have any questions, please contact Mr. Edward Reasner at (717) 783-2559, and refer

Sincerely,

A handwritten signature in black ink, appearing to be 'M. Alaa Azab', written in a cursive style.

for M. Alaa Azab, P.E., Chief
Engineering Technology and Information Division
Bureau of Construction and Materials

Attachments

PENNSYLVANIA DEPARTMENT OF TRANSPORTATION

CERTIFICATE OF COMPLIANCE INSTRUCTIONS

Line

1. **COUNTY, LR/SR, SEC/SEG.**
To be completed by the party that will ship the material to the construction project, otherwise leave blank.
2. **NAME OF MANUFACTURER, FABRICATOR, COATER, PRECASTER OR PRODUCER**
Circle one; either **Manufactured, Fabricated, Coated, Precasted or Produced** as appropriate. Also, provide the name of the **Manufacturer, Fabricator, Coater or Precaster** of the material listed in **Bulletin #15** or the name of the **Producer** of material listed in **Bulletin # 14, 41 or 42.**
To be completed by the party that is shipping approved material to the next destination.
3. **MEETS SPECIFICATION REQUIREMENTS**
To be completed by the party that is shipping approved material to the next destination.
4. **SHIPPED TO**
List the name of company that the material is being shipped to.
5. **LOT NUMBER, QUANTITY, DESCRIPTION OF MATERIAL**
To be completed by the party that is shipping approved material to the next destination.
6. **CHECK THIS BLOCK IF YOUR PRODUCT CONTAINS IRON OR STEEL**
To be completed by the party that is shipping approved material to the next destination.
7. **VENDOR CLASSIFICATION CHECK ONE BLOCK ONLY**
If you are a **Manufacturer, Fabricator, Coater or Precaster** listed in **Bulletin #15**, or a **Producer** listed in **Bulletin # 14, 41 or 42**, check block # 1.

If you are a ***Distributor, *Supplier or *Private Label Company** of **Bulletin #15** items, check block # 2.
* (These categories are not eligible for listing in **Bulletin #15**, however, you may provide material for **PennDOT** projects on condition that the material being shipped is listed in **Bulletin #15**.)
8. **CERTIFICATION REQUIREMENTS, Name, Title, Date, Company Name, and Signature**
Enter the required information and sign the Certificate of Compliance form.
9. **COMPLETE LINE # 9 ONLY IF YOU CHECKED BLOCK # 2 ON LINE # 7, OTHERWISE LEAVE BLANK**
List the company that sold the material to you. (Company Name)

IN ADDITION

2. & 5. **Private Label Companies** who complete the Certificate of Compliance form CS-4171 must **identify** the **true manufacturer** (Line 2) and the **approved material** (Line 5) as it is **listed in Bulletin # 15** under that manufacturers listing.

After completing the Certificate of Compliance form CS-4171, maintain the original at your company's location. A copy of the Certificate of Compliance form must accompany your material **shipment** to its next destination. Also, if you **receive material shipments** from other companies related to **PennDOT** projects, the accompanying Certificate of Compliance forms must be kept on file at your location. These files must be available for inspection and verification by a Department Representative for a period of not less than **THREE** years from the date of the last shipment.

PENNSYLVANIA DEPARTMENT OF TRANSPORTATION CERTIFICATE OF COMPLIANCE



1. ♦ COUNTY: _____ ♦ LR/SR: _____ ♦ SEC/SEG: _____ ECMS#: _____

♦ (To be completed by the party that will ship the material to the project, otherwise leave blank.)

2. I / WE hereby certify that the material listed on line 5 was:

- Manufactured
- Fabricated
- Coated
- Precasted
- Produced

By _____
(Name of Manufacturer, Fabricator, Coater, Precaster or Producer) (Supplier Code)

Publication 408, Section(s), _____

AASHTO, ASTM, Federal or other designation _____

4. The material listed below is being shipped to _____
(Company Name)

5.	LOT NO.	QUANTITY	APPROVED MATERIAL AS LISTED IN BULLETIN # 14 or 15. BULLETIN # 41 or 42 PRODUCERS, LIST HMA / PCC JMF.
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6. **CHECK HERE IF YOUR PRODUCT CONTAINS IRON OR STEEL** I / WE certify that we received a copy of the Mill Certification Form(s) from the manufacturer(s) of any steel or iron materials contained in our product and **all manufacturing processes** including coatings application (e.g., epoxy, galvanizing, or painting) have occurred in the United States and we are maintaining copy(s), in our files in accordance with Section 106.03(b)3. Note: While coating materials themselves are not covered by Buy America, the application of these materials on steel or iron must occur in the United States.

7. **VENDOR CLASSIFICATION - CHECK ONE BLOCK ONLY**

1 **Manufacturer, Fabricator, Coater, Precaster Listed in Bulletin # 15, or Producer Listed in Bulletin # 14, 41 or 42**

I certify that the above statements are true and to the best of my knowledge, fairly and accurately describe the product(s) listed.

2 **Distributor, Supplier or Private Label Company Not Listed in Bulletin # 15. Also, complete line 9**

I certify that the material being supplied is one and the same as provided to us by the manufacturer listed on this document and quantities listed above are accurate.

8. **NAME (print):** _____ **TITLE:** _____

COMPANY NAME: _____

SIGNATURE: _____ **DATE:** _____

9. List company that sold you the material(s) documented above: _____
(Complete if you checked Block # 2 on line # 7, otherwise leave blank.) (Company Name)

After completing the Certificate of Compliance form CS-4171, maintain the original at your company's location. A copy of the Certificate of Compliance form must accompany your material **shipment** to its next destination. Also, if you **receive material shipments** from other companies related to PennDOT projects, the accompanying Certificate of Compliance forms must be kept on file at your location. These files must be available for inspection and verification by a Department Representative for a period of not less than **THREE** years from the date of the last shipment.

*** Private Label Companies must identify the true manufacturer (Line 2) and the approved material (Line 5) as listed in Bulletin # 15.**