**OREGON DEPARTMENT OF TRANSPORTATION**

**Transportation Safety Division**

**On-Site Mid-Year Report**

**Financial records review:**

**Recommendations for current grant:**

**Recommendations for continuation:**

**Project No.:**

**Agency:**

**Project Director:**

**TSD Project Manager:**

**Date of Visit:**

**Date of Report:**

**Project Name:**

**Project Status:**

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**Report on Objectives:**

**Findings**

**Objectives**

1.

2.

3.

4.

**Equipment Verification:**

***Serial No.***

***Date Verified***

***Verified By***

***Comments***

**Verify Until:**

**Location:**

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