



DENSITY TEST REPORT-
DIRECT READ

Form 300.03
Rev. 05/2024

Date: _____ Contract #: _____ Project #: _____ Road #: _____

Road Info: _____ Contractor Name: _____

Inspector Name: _____ Nuclear Gauge Operator: _____

Base _____ Compaction %: _____ SCDOT Gauge #: _____

Standard Count-Density: _____ Lab Max Dry Density: _____

Standard Count-Moisture: _____ Lab Optimum Moisture: _____

A	B	C	D	E	F	G	H	I	J
Offset	Station	Distance	Density Count	Wet Density (pcf)	Moisture Count	Moisture (pcf)	Dry Density (pcf) (E - G)	Moisture (G/H x 100)	Compaction (H/ LabMaxDry x 100)
								%	%
								%	%
								%	%
								%	%
								%	%
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Use Procedures SC-T-22, SC-T-30, SC-T-31, SC-T-32, and SC-T-33 for completing this form.

Additional Info.

Certified Inspector Signature: _____ Date: _____