



**MaineDOT**

**MAINE DEPARTMENT OF TRANSPORTATION**  
*Safety, Training, & Research Office*

**PRELIMINARY INFORMATION FOR PRODUCT EVALUATION**  
**Qualified Products List (QPL) Submittal Form**

Please answer all questions. Where a question is not applicable, enter "N/A". Attach extra sheets if needed.  
Please refer to item number when explaining any item. Please do not re-format this document.

1. Product Trade Name \_\_\_\_\_

Manufacturer \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Website \_\_\_\_\_

2. Local Distributor \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

Website \_\_\_\_\_ Email \_\_\_\_\_

3. Brief Description of Product \_\_\_\_\_

4. Recommended Uses \_\_\_\_\_

5. Outstanding Features or Advantages Claimed \_\_\_\_\_

6. General Composition of Material (Attach Laboratory Report When Applicable)

7. VOC Content (g/l) \_\_\_\_\_

8. Alternate for What Existing Product? \_\_\_\_\_

\_\_\_\_\_ Date Introduced on Market \_\_\_\_\_

9. Cost Per Unit Material (F.O.B.) \_\_\_\_\_

