



# DE-STRESSING REPORT

<b>Date:</b> _____	<b>Project Name:</b> _____	<b>PRLT: 100 °F</b>	<b>Weather:</b> _____
<b>Time:</b> _____	<b>Contractor:</b> _____	<b>PRLTR: 90 - 115 °F</b>	<b>Ambient Temperature:</b> _____
<b>Location:</b> _____	<b>Subdivision:</b> _____		

RAIL INFORMATION								DE-STRESSING INFORMATION									
Date	Track ID No.	String No.	Rail (N,S,E,W)	Mileage/STA		Northing/Easting		Length (ft)	Rail Temperature (°F)			Adjustment (+/- in.)	Rail Temp. Destressed to (°F)	Direction of Pull	Joints		Weld Type
				From:	To:	N:	E:		RLT	PRLT	Differential				<input type="checkbox"/> Pullers	<input type="checkbox"/> Welded	
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:
				From:	To:	N:	E:								<input type="checkbox"/> Heaters	<input type="checkbox"/> Bolted	<input type="checkbox"/> Flash Butt <input type="checkbox"/> Thermite Weld #:

METHODOLOGY			
<b>Type of Tie:</b> <input type="checkbox"/> Hardwood <input type="checkbox"/> Concrete <input type="checkbox"/> Steel	<b>Risers Used:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Rail Fasteners:</b> <input type="checkbox"/> Anchors <input type="checkbox"/> Clips	<b>Rail Movement:</b> <input type="checkbox"/> Vibrating Rail <input type="checkbox"/> Tapping Plates		
<b>Anchor Pattern:</b> <input type="checkbox"/> Every tie (Bolted) <input type="checkbox"/> Every other tie (Welded)	<b>Reference Marks on Rail</b> <input type="checkbox"/>		
<b>Description of Anchor Box:</b> _____	<b>Info Marked on Web of Rail</b> <input type="checkbox"/>		

**Remarks/Comments:**

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\_\_\_\_\_

\_\_\_\_\_

**Foreman Signature:** \_\_\_\_\_

**Welder Signature:** \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_

**NOTE: The original field copy of the de-stressing report must be signed in ink and submitted.**