

Standard Guidelines for Product Review

## **PTMS Vendors;**

### **Section 00225**

May 25, 2010

#### **00225.16C – PTMS Vendor**

ODOT maintains a list of approved vendors of Portable Traffic Management Systems (PTMS) that provide motorist, and/or workers “real-time” information for improved mobility and safety through a work zone.

We have three categories.

1. Traveler Information – Background Information. These systems provide information which the motorist may use to make route decisions, such as travel times, advanced congestion, alternate route information, incident warnings, and work zone staging information. These systems should perform the following:
  - **Travel Time**
  - **Travel Delay**
  - **Route Management Information**
2. Traffic Control – Commands / Instructions. These systems provide important driving information such as advisory speeds, merging instructions, and lane control directions. These systems should perform the following:
  - **Dynamic Late Merge**
  - **Dynamic Advisory Speed Warning**
  - **Changeable Speed Limit**
  - **Automated Lane Control**
3. Conflict Monitoring – Motorist or worker action required. These systems provide high priority information to warn motorists of traffic conditions and roadway hazards. These systems should perform the following:
  - **Stopped Traffic Warning**
  - **Trucks Entering/Crossing/Exiting Warning**
  - **Excessive Speed Warning**
  - **Work Space Intrusion Warning**
  - **Hazardous Roadway Warning**

We will require the following attributes:

Detection (radar, sonic, optical, etc.)

Monitoring (quality, redundancies, etc.)

Communications (cell, wired, radio, etc.)

Analysis (algorithms, logic, procedures, etc.)

Management (databases, backup, etc.)

Information Delivery (integration with dynamic traffic control devices such as PCMS, broadcasting via radio or internet, and special warnings such as alarms or lights)

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**Submittal Process: Provide to ODOT for QPL Evaluation:**

- [Preliminary Information for Product Evaluation Form.](#)
- 4 copies of brochures and other product Literature describing your programs.
- PTMS Vendor Information form (return a copy of this form along with the required information)

**Application Process:**

- Submittal and Review of Materials
- Conditional Approval if you meet the above criteria. This allows you to be utilized on an approved ODOT project, on a case by case basis.
- Qualification once you have sufficient ODOT project history.

**Submit documentation and submittal forms to:**

ODOT Materials Lab  
Oregon DOT - Product Evaluation Coordinator  
800 Airport Road SE  
Salem OR 97301-4798  
503-986-3059

<http://www.oregon.gov/ODOT/HWY/CONSTRUCTION/QPL/QPIndex.shtml>

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## PTMS Vendor Information

Summary: This is required for all PTMS Vendor submittals. Fill out the following and return it with your submittal.

Vendor Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

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Select the Category of Work that you are capable of supporting:

Conflict Monitoring

Traffic Control

Traveler Information

Select the types of equipment you offer:

Detection (radar, sonic, optical, etc.)

Monitoring (quality, redundancies, etc.)

Communications (cell, wired, radio, etc.)

Analysis (algorithms, logic, procedures, etc.)

Management (databases, backup, etc.)

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Vendor Name: \_\_\_\_\_

**Experience**

For each category of work you selected, please describe your experience level. Be specific; don't just include a copy of your catalog or brochure.

- A. List other states where applicant is currently qualified to perform this type of work. Include contact names, phone numbers, and email addresses along with the categories of work performed.
- B. List 6 major projects specific to the categories you selected that your company has undertaken as a vendor in the last five years beginning with the most recent. Include contact names, phone numbers, and email addresses.
- C. I certify that I have read the Oregon DOT requirements and that the information I supply in relation to this submittal will be accurate. I further certify that our company will not attempt to supply equipment to an ODOT project that is outside of our ability or its approval status.

Representative Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Representative Phone #: \_\_\_\_\_

Date: \_\_\_\_\_

Experience (describe your experience level): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Years in business supplying this type of equipment: \_\_\_\_\_

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A. Other DOT Approvals:

Vendor Name: \_\_\_\_\_

DOT: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

DOT: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

DOT: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Category Approved: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

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B. Six Major Projects using our equipment:

Vendor Name: \_\_\_\_\_

1. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

2. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

3. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

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Vendor Name: \_\_\_\_\_

4. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

5. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

6. Project: \_\_\_\_\_

Categories Utilized: \_\_\_\_\_

Value of equipment furnished: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_