

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION ITS Facility Management System Safety Barrier Cable System (SBCS) Attribute Form



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Date:	Inspector:	Site Identification Name:
Safety Barrier Cable System Information		
SBCS Controller		Trigger & Indicator
SBCS Name:		Trigger Type: 🗆 Break Away 🗋 Other:
Facility Owner:		Manufacturer:
County:		Model:
Date Installed (yyyy/mm/dd):		Indicator Type: 🛛 Amber Strobe Beacon
Manufacturer:		□ White Strobe Beacon
Model:		Quantity:
Serial Number:		