



STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
ITS Facility Management System
Gantry Attribute Form



ITSFM060
 Page 1 of 5
 Rev. 05/19

| | | | |
|-------------|------------------|-----------------------------|----------------------------|
| Date: _____ | Inspector: _____ | Financial Project ID: _____ | As-Built Drawing No: _____ |
|-------------|------------------|-----------------------------|----------------------------|

| | |
|-----------------------------------------|---------------------------------------------------------------------------------------------|
| Site Identification Name (SIN) _____ | Latitude/Longitude (N/W) or State Plane Coordinate (N/E) ____ = _____ ____ = _____ |
| District: _____ County: _____ | |

Gantry Information

| | |
|------------------------------------------------------------------------------|------------------------------|
| Gantry Name: _____ | Year Installed: _____ |
| Gantry Type: <input type="checkbox"/> Mainline <input type="checkbox"/> Ramp | Electric Circuit Name: _____ |

Automatic Vehicle Identification Transceiver Information

AVI Controller (Transceiver) #1

| | |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| Comments: _____ | Manufacturer: _____ |
| Facility Owner: _____ | Model: _____ |
| Date Installed (yyyy-mm-dd): _____ | Serial Number: _____ |
| Transmit Frequency: _____ | IP Address: _____ |
| Transmit Channel: <u>Not Applicable</u> | MAC Address: _____ |
| Receive Frequency: _____ | Firmware Version: _____ |
| Receive Channel: <u>Not Applicable</u> | Output Ports: <input type="checkbox"/> Fiber: _____ <input type="checkbox"/> Copper: _____ |
| FCC Call Sign: _____ | Connector Type: <input type="checkbox"/> ST <input type="checkbox"/> FC <input type="checkbox"/> SC <input type="checkbox"/> Other _____ |
| FCC Station Class: <u>LR</u> | |
| FCC License Expiration Date: _____ | |

Antenna Connected to AVI #1

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <u>Travel Lane Coverage:</u> <input type="checkbox"/> Lane 1 <input type="checkbox"/> Lane 2 <input type="checkbox"/> Lane 3 <input type="checkbox"/> Lane 4 <input type="checkbox"/> Lane 5 <input type="checkbox"/> Lane 4 <input type="checkbox"/> Lane 6 <input type="checkbox"/> On Ramp <input type="checkbox"/> Exit Ramp Travel Lane Direction: <input type="checkbox"/> NB <input type="checkbox"/> SB <input type="checkbox"/> EB <input type="checkbox"/> WB | <u>Antenna Type:</u> <input type="checkbox"/> Dish <input type="checkbox"/> Panel <input type="checkbox"/> Yagi <input type="checkbox"/> Omni <input type="checkbox"/> Folded Dipole Manufacturer: _____ Model: _____ |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

AVI Controller (Transceiver) #2

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable
 Receive Frequency: _____
 Receive Channel: Not Applicable
 FCC Call Sign: _____
 FCC Station Class: LR
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #2

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____

AVI Controller (Transceiver) #3

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable
 Receive Frequency: _____
 Receive Channel: Not Applicable
 FCC Call Sign: _____
 FCC Station Class: LR
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #3

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____

AVI Controller (Transceiver) #4

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable
 Receive Frequency: _____
 Receive Channel: Not Applicable
 FCC Call Sign: _____
 FCC Station Class: LR
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #4

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____

AVI Controller (Transceiver) #5

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable
 Receive Frequency: _____
 Receive Channel: Not Applicable
 FCC Call Sign: _____
 FCC Station Class: LR
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #5

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____

AVI Controller (Transceiver) #6

Comments: _____

Facility Owner: _____

Date Installed (yyyy-mm-dd): _____

Transmit Frequency: _____

Transmit Channel: Not Applicable

Receive Frequency: _____

Receive Channel: Not Applicable

FCC Call Sign: _____

FCC Station Class: LR

FCC License Expiration Date: _____

Manufacturer: _____

Model: _____

Serial Number: _____

IP Address: _____

MAC Address: _____

Firmware Version: _____

Output Ports: Fiber: _____ Copper: _____

Connector Type: ST FC SC Other _____

Antenna Connected to AVI #6

Travel Lane Coverage:

Lane 1 Lane 2 Lane 3 Lane 4 Lane 5

Lane 4 Lane 6 On Ramp Exit Ramp

Travel Lane Direction: NB SB EB WB

Antenna Type:

Dish Panel Yagi Omni Folded Dipole

Manufacturer: _____

Model: _____

AVI Controller (Transceiver) #7

Comments: _____

Facility Owner: _____

Date Installed (yyyy-mm-dd): _____

Transmit Frequency: _____

Transmit Channel: Not Applicable

Receive Frequency: _____

Receive Channel: Not Applicable

FCC Call Sign: _____

FCC Station Class: LR

FCC License Expiration Date: _____

Manufacturer: _____

Model: _____

Serial Number: _____

IP Address: _____

MAC Address: _____

Firmware Version: _____

Output Ports: Fiber: _____ Copper: _____

Connector Type: ST FC SC Other _____

Antenna Connected to AVI #7

Travel Lane Coverage:

Lane 1 Lane 2 Lane 3 Lane 4 Lane 5

Lane 4 Lane 6 On Ramp Exit Ramp

Travel Lane Direction: NB SB EB WB

Antenna Type:

Dish Panel Yagi Omni Folded Dipole

Manufacturer: _____

Model: _____

AVI Controller (Transceiver) #8

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable _____
 Receive Frequency: _____
 Receive Channel: Not Applicable _____
 FCC Call Sign: _____
 FCC Station Class: LR _____
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #8

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____

AVI Controller (Transceiver) #9

Comments: _____
 Facility Owner: _____
 Date Installed (yyyy-mm-dd): _____
 Transmit Frequency: _____
 Transmit Channel: Not Applicable _____
 Receive Frequency: _____
 Receive Channel: Not Applicable _____
 FCC Call Sign: _____
 FCC Station Class: LR _____
 FCC License Expiration Date: _____

Manufacturer: _____
 Model: _____
 Serial Number: _____
 IP Address: _____
 MAC Address: _____
 Firmware Version: _____
 Output Ports: Fiber: _____ Copper: _____
 Connector Type: ST FC SC Other _____

Antenna Connected to AVI #9

Travel Lane Coverage:
 Lane 1 Lane 2 Lane 3 Lane 4 Lane 5
 Lane 4 Lane 6 On Ramp Exit Ramp
 Travel Lane Direction: NB SB EB WB

Antenna Type:
 Dish Panel Yagi Omni Folded Dipole
 Manufacturer: _____
 Model: _____