

**CONTROLLED TRAFFIC SIGNAL SYSTEM
TESTING -LEVEL C**

Project Name: _____ **Test Date:** _____
System Name: CTSS _____ **Route:** _____ **From MM**_____ . _____ **To MM**_____ . _____

This procedure outlines Level C test to be performed on Controlled Traffic Signal System. The intent of this test is to verify the traffic signal system integration into designated traffic operation center. Perform this test after integration into the designated control center software management systems. After the Contractor's verification test, the Department will conduct a 14-day observational and functional test period.

**PRIOR TO LEVEL C TESTING, ENSURE THAT NETWORK COMMUNICATIONS SYSTEM TESTING IS COMPLETE.
IS NETWORK COMMUNICATION SYSTEM TESTING COMPLETE?**

YES N/A

IF YES, TEST DATE: _____ **TEST RESULT:** PASS FAIL

IF PASS, BEGIN LEVEL C TESTING

IF FAIL, REPEAT NETWORK COMMUNICATIONS TESTING AFTER TROUBLESHOOTING

IF N/A, EXPLAIN _____

Master Controller Location: _____ **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____
Master Controller Manufacturer/Model: _____

TOC Location: _____ **Communications Mode & Provider** _____

Testing Software as approved by NJDOT: _____

List Controlled Traffic Signal System local Controller locations:

Controller #1 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #2 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #3 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #4 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #5 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #6 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #7 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #8 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #9 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

Controller #10 **Route:** _____ **MM**_____ . _____ **NB/SB/EB/WB/Median**
Type/Model _____ **Nearest Side Street Name:** _____

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 System Name: CTSS _____ Route: _____ From MM _____ . _____ To MM _____ . _____

1: COMMUNICATION

No.	Task	Required Value	Actual Value	Pass	Fail	Comments
1.	Verify download of timing plans & configuration data from TOC to all local controllers in traffic control section	X	X			

Controller # 1	PASS _____ FAIL _____ COMMENT _____
Controller # 2	PASS _____ FAIL _____ COMMENT _____
Controller # 3	PASS _____ FAIL _____ COMMENT _____
Controller # 4	PASS _____ FAIL _____ COMMENT _____
Controller # 5	PASS _____ FAIL _____ COMMENT _____
Controller # 6	PASS _____ FAIL _____ COMMENT _____
Controller # 7	PASS _____ FAIL _____ COMMENT _____
Controller # 8	PASS _____ FAIL _____ COMMENT _____
Controller # 9	PASS _____ FAIL _____ COMMENT _____
Controller # 10	PASS _____ FAIL _____ COMMENT _____

2: STATUS

No.	Task	Required Value	Actual Value	Pass	Fail	Comments
1.	From TOC S, obtain intersection status, detector data, & equipment status from all local controller	X	X			

Controller # 1	PASS _____ FAIL _____ COMMENT _____
Controller # 2	PASS _____ FAIL _____ COMMENT _____
Controller # 3	PASS _____ FAIL _____ COMMENT _____
Controller # 4	PASS _____ FAIL _____ COMMENT _____
Controller # 5	PASS _____ FAIL _____ COMMENT _____
Controller # 6	PASS _____ FAIL _____ COMMENT _____
Controller # 7	PASS _____ FAIL _____ COMMENT _____
Controller # 8	PASS _____ FAIL _____ COMMENT _____
Controller # 9	PASS _____ FAIL _____ COMMENT _____
Controller # 10	PASS _____ FAIL _____ COMMENT _____

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3: CAPABILITY

No.	Task	Required Value	Actual Value	Pass	Fail	Comments
1.	From TOC, verify local controllers ability to store timing plans, time of day schedules, & implementation of selected timing plan	X	X			

Controller # 1	PASS _____ FAIL _____ COMMENT _____
Controller # 2	PASS _____ FAIL _____ COMMENT _____
Controller # 3	PASS _____ FAIL _____ COMMENT _____
Controller # 4	PASS _____ FAIL _____ COMMENT _____
Controller # 5	PASS _____ FAIL _____ COMMENT _____
Controller # 6	PASS _____ FAIL _____ COMMENT _____
Controller # 7	PASS _____ FAIL _____ COMMENT _____
Controller # 8	PASS _____ FAIL _____ COMMENT _____
Controller # 9	PASS _____ FAIL _____ COMMENT _____
Controller # 10	PASS _____ FAIL _____ COMMENT _____

4: SYNCHRONIZATION

No.	Task	Required Value	Actual Value	Pass	Fail	Comments
1.	From TOC, verify the synchronization of timing among controllers in a traffic control section.	X	X			

Controller # 1	PASS _____ FAIL _____ COMMENT _____
Controller # 2	PASS _____ FAIL _____ COMMENT _____
Controller # 3	PASS _____ FAIL _____ COMMENT _____
Controller # 4	PASS _____ FAIL _____ COMMENT _____
Controller # 5	PASS _____ FAIL _____ COMMENT _____
Controller # 6	PASS _____ FAIL _____ COMMENT _____
Controller # 7	PASS _____ FAIL _____ COMMENT _____
Controller # 8	PASS _____ FAIL _____ COMMENT _____
Controller # 9	PASS _____ FAIL _____ COMMENT _____
Controller # 10	PASS _____ FAIL _____ COMMENT _____

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5: MONITORING

No.	Task	Required Value	Actual Value	Pass	Fail	Comments
1.	From TOC, verify phase monitoring, controller mode status, and failure status flags information transmit to traffic operation center on request as per NTCIP protocol	X	X			

Controller # 1	PASS _____ FAIL _____ COMMENT _____
Controller # 2	PASS _____ FAIL _____ COMMENT _____
Controller # 3	PASS _____ FAIL _____ COMMENT _____
Controller # 4	PASS _____ FAIL _____ COMMENT _____
Controller # 5	PASS _____ FAIL _____ COMMENT _____
Controller # 6	PASS _____ FAIL _____ COMMENT _____
Controller # 7	PASS _____ FAIL _____ COMMENT _____
Controller # 8	PASS _____ FAIL _____ COMMENT _____
Controller # 9	PASS _____ FAIL _____ COMMENT _____
Controller # 10	PASS _____ FAIL _____ COMMENT _____

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Project Name: _____ Test Date: _____
System Name: CTSS _____ Route: _____ From MM _____ . _____ To MM _____ . _____

LEVEL C TEST RESULTS:

PASS

FAIL

Correction Work Items:

1. _____
2. _____
3. _____
4. _____
5. _____

We agree that Level C testing of the Controlled Traffic Signal System has been performed and that the information above accurately represents the results of the test.

Contractor Name: _____
Contractor Representative Name: _____
Signature and Date: _____

ITS Inspector Name: _____
Signature and Date: _____

Traffic Operations Center Representative Name: _____
Signature and Date: _____

Resident Engineer Name: _____
Signature and Date: _____

Corrected Work Items:

Work Items

1. _____
2. _____
3. _____
4. _____
5. _____

Signatures & Date

ITS Inspector TOC Representative

- | | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |