



Attachment E

Certificate of Spreader Calibration (Open Loop) 2026-2027

Only to be used for equipment with Miscellaneous Code #3

Depot Name/No. _____

Vendor's Name: _____

Vehicle Information

Equipment No. _____ Registration No. _____ VIN(Last 5 digits): _____

Year: _____ Make: _____ Model: _____

Spreader Equipment

Make: _____ Model/Serial No: _____

Control System

Make: _____ Model/Serial No.: _____

All vehicles must be capable of consistently dispensing highway-deicing salt at the application rates shown below, while traveling at the rate of speed between 5 and 35 MPH.

Application Rate	Setting	
	Rate Dial	Gate (in)*
A: 240 lb/1-lane mile +/- 10 lb		
B: 480 lb/2-lane mile +/- 20 lb		
C: 720 lb/3-lane mile +/- 30 lb		

* Gate setting is measured from the spreader body conveyor floor to the hardened bottom of gate.

Authorized Calibration Company: _____

Certifies that the above listed spreader automated system is operating properly and that the spreader has been calibrated as shown. **Place official company stamp atop form.**

Calibration Company Signature: _____ Date: _____

NOTE: One copy of this completed certification is to be kept in the vehicle and the **original** is to be submitted to MassDOT's District Office. **Calibration Contractor MUST also submit a copy to Boston Snow & Ice Office.**