If you require assistance accessing this information or require it in an alternative format, contact the Michigan Department of Transportation's (MDOT) Americans with Disabilities Act (ADA) coordinator at www.Michigan.gov/MDOT-ADA.

Michigan Department of Transportation 0258 (03/2022)

PROGRAM APPLICATION FOR LOCAL AGENCY PROJECTS BRIDGE PROJECTS

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Administered through MDOT Local Agency Programs (LAP)

This form must be completed, signed, sealed, and certified by a Licensed, Registered Professional Engineer. Submit all pages of this form. Complete MDOT Form 5323 and forward it separately from this form, at least 4 months before making the Grade Inspection submittal.

PROJECT LOCATION AND LIMITS				
ELIGIBLE APPLICANT AGENCY				DATE
ROUTE NAME				
CROSSING				
LENGTH OF PROJECT (Miles)	ZIP CODE (RITY OF PROJECT	
Is the project within urban limits?	☐ Yes	☐ No	Which urban area?	
Is the project within City/Village limits?	Yes	☐ No	Which City/Village?	
Are other jurisdictions involved?	☐ Yes	☐ No	If yes, identify:	
NAME OF MPO OR RURAL TASK FORCE	<u> </u>		MDOT JOB NUMBER	
*This information is required by the State A	dministrative Boa	rd in order	to approve the agreement and constru	ction contract for this project.
ROUTE TYPE: From the Structure I	nventory and A	Appraisa	I Coding form (1717A):	
URBAN Principal Arterial,				erial, 01 or 02, on-system
☐ Minor Arterial, 12 o	-	n		al, 06, on-system
☐ Urban Collector, 1	-			ctor, 07, on-system
 ☐ Local, 19, off-syste	•		·	ctor, 08, off-system
			Local, 09, of	•
On the National Highway System (NH	S): Yes		☐ No	
EXISTING STRUCTURE:	-1		fort for a total averall location of	£4.
Number of spans:	at	4	_ feet, for a total overall length of:	feet;
Number of spans: Posted load limit	at	_ tons;	Operating rating	tons;
Number of spans:	at	_ tons; _ feet;		
Number of spans: Posted load limit	at	_ `	Operating rating	tons;
Number of spans: Posted load limit Clear roadway width	at	_ `	Operating rating	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE	at	_ `	Operating rating	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE		_	Operating rating Width of sidewalks: IF CLOSED, WHEN	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE		_ feet;	Operating rating Width of sidewalks: IF CLOSED, WHEN	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE	HABILITATED	_ feet;	Operating rating Width of sidewalks: IF CLOSED, WHEN	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE	HABILITATED o, explain:	_ feet;	Operating rating Width of sidewalks: IF CLOSED, WHEN YEAR MON	tons;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE Yes No, If No.	HABILITATED o, explain:	reet;	Operating rating Width of sidewalks: IF CLOSED, WHEN YEAR MON	tons; feet;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE Yes No, If No. EXISTING APPROACH AWAY FROM Number of lanes:	HABILITATED o, explain:	reet;	Operating rating Width of sidewalks: IF CLOSED, WHEN YEAR MON THE BRIDGE: feet each, total travel roadway w	tons; feet; TH idth: feet;
Number of spans: Posted load limit Clear roadway width RAILING TYPE STRUCTURE TYPE CONDITION OF STRUCTURE CAN THE EXISTING STRUCTURE BE RE Yes No, If No.	HABILITATED o, explain: I THE INFLUE! at	NCE OF 1	Operating rating Width of sidewalks: IF CLOSED, WHEN YEAR MON THE BRIDGE: feet each, total travel roadway w	tons; feet; TH idth: feet;

PROPOSED STRUCTU					
	at				et .
Clear roadway width:			ewalks		
The minimum clear road	dway width by current AASH	TO: feet. From t	able:	on Page	
REASON FOR USING OT	HER THAN THE CURRENT AA	SHTO MINIMUM CLEAR	ROADWAY WIDTH AS S	HOWN ABOVE:	
PROPOSED APPROA	CH AWAY FROM THE INFL	UENCE OF THE BRID	GE:		
Number of lanes:	at	feet each,	total travel roadway wi	dth:	feet
Type of pavement		Width of si	dewalks:	feet	
Curb and Gutter	☐ One Side	☐ Both Sides		None	
Shoulders	Туре		feet, each side		
Section B – New Co Section C – Resurfa Note: For all projects, Current AASHTO Operating Committee Posted Speed Note: With no posted Present Average Daily Future Average Daily To	affic AND MOBILITY (WZS&M):	R-AASHTO) Sepolitation (3R) Fort and analysis, for the second se	cction D – Preventive Me immediate past the blume Local Roads," Speed % Commercial	ree years. with the MDOT mph Year	
All local agency projects Safety and Mobility" gui	s have been determined to be dance.	e "Significant", accordin	g to the "Local Agency	Policy for Work 2	one
	completed the appropriate acompleted the appropriate che			oletion of Yes	□No
Copies of these comple	ted checklists are included in	n the Local Agency's pro	oject file	☐ Yes	□No
UNIQUE SPECIAL PR	ROVISIONS Ill Unique Special Provisions	(USP's) before use in p	projects. Also, FHWA n	nust	
approve USP's related	to Hot Mix Asphalt (HMA), Cements, pro ducts or materia	Concreté Quality Assura	nce / Acceptance, and		
methods that are not a	se using any design element ccording to AASHTO or MDC d Specifications for Construc	OT design standards, or		g ☐ Yes	□ No
	Inique Special Provisions (US		-	☐ Yes	П №

FUNDING INFORMATION

CURRENT APPROVED AND PROGRAMMED FUNDING FOR THIS PROJECT

This section is the "budget" information for your project. Enter the approved programmed fund amounts, from JobNet, for the various sources shown below. If the funding category for your funds is not listed specifically below, then enter the funding source (ie federal earmark, State, Rail, ER, etc) in the "Other – Source" field below.

Approved Funding Source	Amount	Funds	State Funds	Funds	Yes or No
Bridge - Federal					
Bridge - State					
Bridge - Local					
Federal STP - Urban					
Federal STP - Rural Other - Source (Earmark, Rail, ER, etc)					
Total Programmed Fund	ds:				
ADV	ANCED CONSTRUCTION	ON CONTRACT (ACC) FUNDS INFORI	MATION (If Applic	able)
Amount of ACC funds requested: _		ACC fu	nds from Fiscal	Year(s):	
	<u>CL</u>	JRRENT ESTIMATED	CONSTRUCTIO	N COST	
In the fields provided in this section, list the	e current Estimated Constru	uction Costs for the proje	ct.		
The Total Estimated Construction Cost mu estimated cost is not within 25% of the bud delay fund obligation.					
ESTIMATED COST - ELIGIBLE, PAI	RTICIPATING CONTRA	ACT WORK:			
ESTIMATED COST - PARTICIPATIN	IG FORCE ACCOUNT V	WORK (DO NOT INCI	UDE ENGINEER	ING FEES)	
	Type or Item(s) of wor	rk		Estimat	ed Cost
a)					
b)					
Subtotal - Eligible, Participating Fo	orce Account Work:				
Subtotal - Estimated Cost - Eligible	e, Participating Work:				
NON-PARTICIPATING CONTRACT	WORK (DO NOT INCL	UDE ENGINEERING	FEES OR OTHE	R NON-CONTRA	CT ITEMS)
	Type or Item(s) of worl	k		Estimate	d Cost
_a)					
_b)					
Subtotal - Non-Participating Cont	ract work				
Total - Estimated Construction C	ost				
	. A P LL.				
Eligible Participating CE Work (If	Applicable)				
PREPARER'S TYPED NAME AND TITL	E	PREPARER'S E-MAIL A	DDRESS	PREPARER'S PHOI	NE NUMBER
ACCEPTED BY LOCAL AGENCY REPR	RESENTATIVE (E-SIGNAT	URE)		DATE	

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NATIONAL ENVIRONMENTAL PROTECTION ACT (NEPA) CERTIFICATION The local agency makes its NEPA certification using MDOT Form 5323, available at the MDOT Form Repository website at https://mdotjboss.state.mi.us/webforms/Home.htm NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT Is a NPDES notice of Coverage (NOC) form required? ☐ Yes ☐ No If "Yes", Complete the NOC form, submit it to Michigan Department of Environmental, Great Lakes, and Energy (EGLE), and maintain a file copy. FEDERAL AVIATION ADMINISTRATION (FAA) ☐ Yes ☐ No The project is located within 20,000 feet of a public use airport, airfield, or Military airport. ☐ Yes ☐ No Does this project meet criteria that requires a notice of construction to be filed with FAA? If "Yes", place all correspondence, including notices and permits, in ProjectWise Folder 3 **MICHIGAN DEPARTMENT OF TRANSPORTATION (MDOT)** Is construction proposed in any MDOT owned Right-of-Way? ☐ Yes □ No Will traffic control devices such as temporary signs, barricades, lighted arrows, or message boards, be placed in any MDOT right-of-way during construction? Are any MDOT-owned electronic signs or control devices, such as traffic signals, pavement markings, or pedestrian signals, existing within the project limits or proposed to be constructed as part of this project? ☐ Yes ☐ No If any answer above is yes, then contact the MDOT permit engineer and obtain a MDOT permit. **UTILITY COORDINATION CERTIFICATION** All private and municipal utility relocations, if required, will either be relocated prior to contract award or have been identified in the bid proposal's Notice to Bidders - Utility Coordination. **RAILROAD CROSSING CERTIFICATION:** ☐ Yes ☐ No Within project limits, or on a detour or alternate route? If "yes", is a Diagnostic Study Team Review (DSTR) meeting required? ☐ Yes ☐ No Please include a copy of completed MDOT Form 1425 in ProjectWise. If yes, Diagnostic Study Team Review Meeting Scheduled? ☐ No Completed? ☐ Yes ☐ No ☐ Yes All construction that impacts an at-grade railroad crossing or railroad-highway grade separation will be coordinated with the MDOT Office of Rail. This includes work within the project limits as well as on alternate routes and detour routes. All applicable notices to bidders, special provisions, and coordination clauses will be included in the final bid proposal document. All required agreements and all applicable railroads force account authorizations will be executed before federal construction funds are obligated. **ASBESTOS TESTING** The project involves removing elements of the bridge. Examples include concrete, joints, membranes, conduits, and any element that may contain asbestos. A full structure survey of the bridge has been conducted to identify any potential asbestos containing materials (ACMs) by a

NESHAP certified asbestos inspector. Testing for asbestos has been completed by a qualified testing facility on all potential ACMs. This includes any component that may contain asbestos including, but not limited to, concrete elements (deck, beams, substructure units etc.), joint material, membranes, HMA overlays and conduits. All concrete elements that work will be

☐ Yes ☐ No

Completed?

performed on have had the concrete tested for asbestos.

ATTACHMENT A Property Acquisition Information Page 1 of 1

Submit a completed Attachment A to the MDOT LAP Staff Engineer as part of the Program Application. The LAP Staff Engineer will forward the completed Attachment A to the MDOT Real Estate Services Section for review.

	Failure to comply with these regulations and rec g for all phases of this project as well as for futur		al Agency's federal
ELIGIB	LE APPLICANT AGENCY		DATE
PROJE	CT LOCATION		
PROJE From:	CT TERMINI	To:	
Projec	et Information		
NOTE	Property Acquisition includes obtaining any propermanent easements, temporary consents to replacement (owner/tenant)		
	property acquisition required for this project? Yes No Possible, but	it not known at this time	
	o you anticipate any relocation as part of this project? Yes No Possible, bu	it not known at this time	
	o you anticipate any water service replacement work on NOT answer "Yes" if such service replacement will l		
	Yes, name the Water Authority Owner:	No Dessit	ole, but not known at this time
4. Co	ntact information for the person/company who will be	acquiring the property.	
NAME		COMPANY	
E-MAIL	ADDRESS	TELEPHONE NUMBER	
☐ STA	AFF CONSULTANT	☐ UNKNOW	'N
Projec	t Compliance & Certification:		
1.	I agree to comply with all applicable State and Fed including:	eral laws and regulations when acquiri	ng property for this project,
	 Uniform Relocation Assistance and Real 23 CFR Parts 635, 710, 810 and 49 CFR Uniform Condemnation Procedures Act (The current MDOT Real Estate Manual a website: Real Estate Guidance and Information 	Part 24 Act 87 of 1980) nd additional guidance and information	
2.	I understand that all property acquisition requires to Appraisal/Appraisal Review and that the property of Valuation or Appraisal/Appraisal Review.		
3.	I understand that staff acquiring property on this pr Federal laws and regulations.	oject must understand and comply with	n all applicable State and
BY: (S	ignature of Authorized Person Employed by the Eligible Appl	icant Agency)	DATE
NAME	/ TITLE		
	ADDRESS	TELEPHONE NUMBER	

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ATTACHMENT "B" Property Acquisition Certification Page 1 of 2

Do not submit Attachment B to Local Agency Programs until <u>all</u> the required property has been acquired. Submittal must be received by LAP before funds can be obligated, and at least four weeks before the expected advertisement date.

ELIGIBL	E APPLICANT AGENCY		DATE
PROJEC	T LOCATION		
PROJEC From:	T TERMINI	To:	
Proper	y Acquisition Certification:		
	The project <u>did not</u> require the acquisition of addition way, including permanent fee, permanent easement a Project Certification Section on the following page.	and temporary property rights. If this it	
	The project <u>did</u> require the acquisition of additional pro including permanent fee, permanent easement, and ter checked, complete the information below and sign	mporary property rights, and water serv	vices. If this item is
	Number of <u>parcels</u> (different ownership, or not	contiguous) required for this project	ct:
	Parcels affected by Relocations	<u>Tota</u>	al Instruments Acquired
	Residential Housing :	Permanent Fee (Tot	al Take):
	Business, farm, non-profits :	Permanent Fee (Parti	al Take):
		Easement (Per	manent):
	Tempora	ry Rights (Consents, Agreements, Leas	ses, etc):
	Water service replacement consents for work ou contract. DO NOT include parcels for which service	replacement will be completed separat	
	The Local Agency must keep the following acquiseparate parcel files (other documentation may)		n in each of its
	Title evidence (Title Commitment for permane	ent acquisitions and Tax Records for te	emporary acquisitions)
	➤ Waiver Valuation or Appraisal/Appraisal Revi	ew	
	Written Good Faith Offer Letter showing just of the Waiver Valuation or Appraisal/Appraisal F		rty owner established by
	Instruments of Conveyance (Executed and re executed documents for temporary property r		erty rights acquired and
	Memos of Negotiation (Acquisition Agent's de	etailed notes about the acquisition)	

The Local Agency must keep the following relocation documentation in each of its separate parcel files,

> Relocation eligibility notice

as applicable:

- > Replacement housing determination or replacement rental determination
- > Relocation claims and payment documentation

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ATTACHMENT "B" Property Acquisition Certification Page 2 of 2

Project Certification

This certifies that the Local Agency has legal and physical possession of all right of way required for construction, operation and maintenance of this project, including all permanent fee, permanent easement and temporary property rights.

This certifies that the Local Agency acquired all right of way in accordance with FHWA regulations promulgated under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended (Uniform Act) and the Uniform Condemnation Procedures Act (Act 87 of 1980) and MDOT's current Real Estate Manual.

This certifies that the Local Agency has secured permission from all real property interests necessary to complete the water service line replacement work outside the right of way to be in compliance with 23 CFR 645.111 Right-of-way (Subpart A-Utility Relocations, Adjustments, and Replacements), if applicable.

The(Eligible Applicant Agency) necessary for the construction, operation, and maintenance of t		hysical posses	ssion of <u>all</u> the property	
BY: (Signature of Authorized Person Employed by the Eligible Applicant Agency)			DATE	
NAME AND TITLE				
ADDRESS	CITY	STATE	ZIP CODE	
TELEPHONE NUMBER	E-MAIL ADDRESS			

NOTE: Failure to acquire and provide adequate documentation of legal possession of all property required for construction, operation and maintenance of this project, including all permanent fee, permanent easement and temporary property rights will jeopardize obligation of state and federal funds and advertising and letting of the project. For additional information on required documentation, see the LPA Real Estate Guidance pages of the LAP website (www.Michigan.gov/mdot), then click the "Real Estate Guidance and Information" link in the section headed "Guidance Documents".

Adequate documentation includes, but is not limited to, all documentation outlined on the previous page.

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PROJECT ENGINEER AND PROFESSIONAL REGISTRATIONS AND CERTIFICATIONS Page 1 of 2

This form must be completed, signed, sealed, and certified by the Project Engineer prior to the grade inspection meeting.

The County, City, or Village is required to immediately notify the MDOT TSC, in writing, of all changes in staff listed below, during the project. Failure to provide accurate documentation and/or failure to maintain the required information may cause construction to immediately stop, and may result in the withdrawal of federal and/or state funding, and may jeopardize future federal and/or state funding. PROJECT LOCATION (number) Licensed, Registered Professional Engineers, licensed in Michigan, assigned to this project (minimum required is 1). The Professional Engineers are: The lead Professional Engineers or are also assigned to other projects that will be under construction during the same time period as this project. Number of federal aid projects that the Professional Engineers have been assigned the lead role for construction engineering: _____ current working on past 5 years not including current projects The Certified Computerized Office Technician assigned to the project is List all AASHTO accredited laboratories that will be used to conduct all required testing. List the Michigan Licensed Land Surveyor (person and company) that will be utilized for all project work that requires a licensed land surveyor. (number) of Certified Construction Technicians are assigned to this project. The Technicians assigned have obtained the following certifications (please check all that apply): Michigan Concrete Field Testing – Level 1 (MCA or MCPA) ☐ MDOT Bituminous Paving or Bituminous Paving Operations ☐ Michigan Certified Aggregate Technician Michigan Certified Bituminous Laboratory Technician (Level 1) ☐ Michigan Bit QC/QA Technician (Level 2) ☐ SESC (Soil Erosion and Sedimentation Control) Storm Water Operator (SWO) requirement for NPDES National Pollutant Discharge Elimination System NOTE: A copy of the NRC Nuclear Density Gauge License shall be placed in the project file for all nuclear density gauge used on the project. do certify that we own and are trained, or have hired (Authorized Person Employed by the Eligible Applicant Agency) who is (Name of firm performing the work) trained, to use the following (check all that apply)

All necessary equipment to perform density inspection and testing as required in Divisions 2 & 3 of the 2012 MDOT Standard Specifications for Construction, all applicable Frequently Used Special Provision (FUSP's), and

Field Manager and necessary computer equipment

MDOT Materials Quality Assurance Procedures Manual;

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PROJECT ENGINEER AND PROFESSIONAL REGISTRATIONS AND CERTIFICATIONS Page 2 of 2

 All necessary equipment to perform aggreg Specifications for Construction, all applicable Manual; 				
All necessary equipment to perform hot mix as Construction, all applicable FUSP's for hot n Testing, and Materials Quality Assurance Prod				
All necessary equipment to perform Portland Standard Specifications for Construction, a Procedures Manual.				
A total of(number) personnel are assigned to all that apply)	this project who are I	knowledgeable in the u	se of these	e items (check
	es Manual Ianual ages, this local age		adequate	ly staffed and
SIGNATURE (Authorized person employed by the Eligible Applica	ant Agency)		DATE	
SIGNATURE (Project Engineer)			DATE	
PROJECT ENGINEER'S TYPED NAME AND TITLE		AFFIX LICENSED PRO SEAL	FESSIONA	L ENGINEER'S
PROJECT ENGINEER'S REGISTRATION NO.	EXPIRATION DATE			
PROJECT ENGINEER'S FIRM NAME, IF APPLICABLE				
ADDRESS		CITY	STATE	ZIP CODE
PROJECT ENGINEER'S PHONE NUMBER	PROJECT ENGI	NEER'S E-MAIL ADDRE	SS	1

PUBLICLY EMPLOYED PROJECT ENGINEER STATEMENT

PUBLICLY EMPLOYED ENGINEER'S PHONE NUMBER

Complete either this statement, or
The Project Engineer's Statement (Page 11) and the Project Supervisor Statement (Page 12) and submit all to

Local Agency Programs <u>PRIOR</u> to the grade inspection.						
The	has o	lesignated				
(Eligible Applicant Agency)		(Nan	ne of Projec	t Engineer)		
as the Project Engineer for the following project:						
PROJECT LOCATION						
AUTHORIZED SIGNATURE (Authorized Person Employed by the	Eligible Applicant Ager	icy)	DATE			
TYPED NAME AND TITLE						
I,						
SIGNATURE (Publicly Employed Project Engineer)			DATE			
PUBLICLY EMPLOYED ENGINEER'S TYPED NAME AND TITLE		AFFIX LICENSED PROFESSIONAL ENGINEER'S SEAL				
PUBLICLY EMPLOYED ENGINEER'S REGISTRATION NO.	EXPIRATION DATE					
PUBLICLY EMPLOYED ENGINEER'S FIRM NAME, IF APPLICAB	ELE					
ADDRESS		CITY	STATE	ZIP CODE		

PUBLICLY EMPLOYED ENGINEER'S E-MAIL ADDRESS

PROJECT ENGINEER STATEMENT

- Complete either this statement <u>and</u> the Project Supervisor Statement (Page 12) or The Publicly Employed Project Engineer Statement (Page 11) and submit all to Local Agency Programs <u>PRIOR</u> to the grade inspection

to the grade inspection					
The	has o	lesignated			
(Eligible Applicant Agency)		(Nar	me of Projec	ct Engineer)	
as the Project Engineer for the following project:					
PROJECT LOCATION					
AUTHORIZED SIGNATURE (Authorized Person Employed by the	Eligible Applicant Agen	су	DATE		
TYPED NAME AND TITLE					
I,					
construction phase of the project. In this regard I, as the Project Engineer, shall (at a minimum): 1) Be considered in responsible charge of the project; 2) Prepare and maintain the project record files; 3) Sign all construction documents; 4) Attend the grade inspection meeting and the pre-construction meeting; 5) Be available for meetings with the Michigan Department of Transportation, the local agency, the certified inspectors, and/or the contractor; 6) Assure that the plans, specifications and proposal are followed and approve all changes or modifications to the plans, specifications, or proposal; 7) Assure that the construction inspectors are currently certified, as required; 8) Be a Licensed Professional Engineer in the State of Michigan; and 9) Attend the final project review meeting.					
SIGNATURE (Project Engineer)			DATE		
PROJECT ENGINEER'S TYPED NAME AND TITLE		AFFIX LICENSED, REG PROFESSIONAL ENGI		AL	
PROJECT ENGINEER'S REGISTRATION NO.	EXPIRATION DATE				
PROJECT ENGINEER'S FIRM NAME, IF APPLICABLE					
ADDRESS		CITY	STATE	ZIP CODE	
PROJECT ENGINEER'S PHONE NUMBER	PROJECT ENGI	NEER'S E-MAIL ADDRES	SS		

PROJECT SUPERVISOR STATEMENT

- Complete either this statement <u>and</u> the Project Engineer Statement (Page 11), or The Publicly Employed Project Engineer Statement (Page 10) and submit all to Local Agency Program <u>PRIOR</u> to the grade inspection.

The		has designated_					
	(Eligible Applicant Agency)		(Name	e of Project Supervisor)			
as the Project S	upervisor for the following project:						
PROJECT LOCAT	PROJECT LOCATION						
PROJECT TERMI From:	NI	То:					
In this regard, the Project Supervisor, shall (at a minimum): 1) Be a full time employee of the local agency; 2) Approve for funding all construction documents prepared and signed by the Project Engineer; 3) Attend the grade inspection meeting and the pre-construction meeting; 4) Be available for meetings with the Michigan Department of Transportation and/or the Project Engineer 5) Assure that the project record files are maintained; 6) Be in attendance at the final project review.							
SUPERVISOR'S SIGNATURE (Project supervisor) DATE							
PROJECT SUPERVISOR'S TYPED NAME AND TITLE							
PROJECT SUPER	RVISOR'S ADDRESS	CITY	STATE	ZIP CODE			
PROJECT SUPERVISOR'S PHONE NUMBER PROJECT SUPERVISOR'S E-MAIL ADDRESS			RESS				

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ement, a ject fund	sis MUST be co						
ur Analy ement, a ject fund	sis MUST be co						
ement, a ject fund	sis MUST be co						
scour ar		cture replaceme					placement, deck e project, before
Was a scour analysis done for this project?							
				I, IV, V, and VI. deck replacemer	Contact it projects over v	vaterways.	
MMARY	OF HYDRAULI	CS:					
		SUN	MARY OF HYD	RAULIC ANALY	/SIS		
	Fxis		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TO COLIO 7 CONTROL		osed	
Data	Discharge (cfs)	Water Surface Elev. At Upstream Face of Structure (ft)	Velocity in Downstream Channel (fps)	Face of Structure (ft) Waterway Area at Downstream Face (sf) Waterway Area at Downstream Face (sf) Waterway Area at Downstream Face (sf)			Change in Water Surface Elevation Upstream of Proposed Structure (ft)
•							
ar							
	MAX	IMUM BRIDGE AF	REA BELOW LOW	CHORD IS	SQUARE I	FEET	
ater surfand are not and and V ISTING Existin 1) 2) 3)	ace and/or energet to be used for Vater Management STRUCTURE: Ing Structure Is this a complete in this a deck is this a super Describe the in the second is the second in the second i	gy grade elevation establishing a resent Division, EGI plete bridge replacement proproposed work entive Maintenancections IV, V and	ons shown on the egulatory floodpl. LE. acement project oject cement project?	e above hydrauli ain. The elevatio	c table are to be ons may be used Yes [Yes [d provided they No	
Existir 1)	Have flooding	g problems beer	n reported or ide	ntified at the proj	ect site? Yes [□ No	
2)	Is Q overtopp If no, go to I\ Overtopping I flow over I flow over	oing less than Q /, if yes, continuous is by: (check or roadway watershed divid acture, explain: _	e. ne) le		Yes [□ No	o 🗆
a	ainage a ter surfa d are no d and V STING Existin 1) 2) 3) 4) Existin 1)	Data Discharge (cfs) In MAX Discharge (cfs) Discharge	Data Discharge (cfs) MAXIMUM BRIDGE AF Discharge (cfs) MAXIMUM BRIDGE AF Discharge area contributory to this crossing of the surface and/or energy grade elevation of area of and Water Management Division, EGB STING STRUCTURE: Existing Structure Discharge (cfs) Existing area contributory to this crossing of the structure and area of a rea of	Data Discharge (cfs) Discharge (cfs) Discharge (cfs) Discharge (cfs) Discharge (cfs) MAXIMUM BRIDGE AREA BELOW LOW Channel (fps) MAXIMUM BRIDGE AREA BELOW LOW Discharge area contributory to this crossing is	Data Discharge	Data Discharge	Data Discharge Cris Discharge Dis

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IV. DESIGN CONSTRAINTS FOR THE PROPOSED STRUCTURE:

NFIP Requirements, contact MDNR for information: Yes □ No \square Is the project in an NFIP flood plain? If No, go to IVB. Has a Flood Insurance Study been conducted? 2) Yes 🗌 No 🗌 If yes, describe the source of the study. Yes 🗌 3) Has a regulatory floodway been designated? No 🗌 4) What is the allowable rise in the 100-year water surface elevation in accordance with NFIP regulations? Explain: B. Environmental and Grade Requirements for the Proposed Structure: Is the proposed structure length the minimum length necessary to avoid encroachment on the natural stream channel? Yes 🗌 No 🗌 If no, explain why not. 2) Is the proposed embankment height and/or minimum structure length designed due to geometric considerations, such as the vertical alignment required for sight distance based on the design speed? Yes No 🗌 Either way, explain what the proposed structure length is based on. 3) Based on past experience, are there ice flow, drift, and/or scour related problems expected at this site? Yes □ No 🗌 If yes, explain how this was taken into consideration in the design of the structure. C. Describe any other considerations regarding design constraints:

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V. FLOODING INFORMATION FOR THE PROPOSED STRUCTURE: Potential traffic delay: Yes □ Is Q overtopping less than Q100? No \square If No, go to (B), If Yes, continue. 2) Is this a sole emergency service and/or evacuation route? Yes 🗌 No 🗌 Either way, explain 3) Detour length, during overtopping, for general traffic: miles. Attach a map or sketch to this program application showing this detour. 4) Length of the emergency detour route: Attach a map or sketch to this program application and explain: 5) Are potential traffic delay costs and/or traffic risks, due to Yes □ No 🗌 overtoping, significant? Either way, explain why or why not. В. Proposed Floodplain Impacts: Describe any/all proposed work in the floodplain, such as abutment or pier removal or placement, road 1) widening, or realignment. Include the approximate quantity of excavation and fill, etc. Attach a sketch to this program application showing the floodplain area and the proposed work and explain: Describe all measure to minimize the harm, such as sedimentation control, erosion control, slope 2) establishment, etc. (These must be shown on the project plans) 3) Will the project's encroachment on the floodplain change the potential for open land damage, as compared to the existing structure? Yes □ If yes, what type of land (residential, farmland, open areas, commercial. etc.) How much and where?

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C.	Potential Impacts to Property and Life: Will the project's encroachment on the floodplain and resultant flooding characteristics change the potential for property losses and/or hazard to life as compared to the existing structure? Either way, explain why or why not.	Yes 🗌	No 🗌
D.	Potential Embankment Damage: Will the proposed project change the potential for roadway or embankment damage due to overtopping, as compared to the existing structure? If yes, explain	Yes 🗌	No 🗆
E.	Additional Factors List any additional factors that should be considered in the assessment proce	SS.	
VI. EVAL	UATION OF THE PROPOSED STRUCTURE:		
A.	Proposed Structure		
	ertical or horizontal alignment being revised?	Yes 🗌	No 🗌
	DESCRIBE THE PROPOSED CHANGES. INCLUDE THE ENTIRE PROJECT PARTIC H A SKETCH, INCLUDING THE CURVE DATA	CIPATING AND NO	DN-PARTICIPATING AND
B.	Alternative Structures Consider alternatives by weighing the proposed structure hydraulics against risks (Section V) identified for the site.	the design cons	straints (Section IV) and
	Should a longer structure be considered for this crossing? If no, explain why not .	Yes 🗌	No 🗌

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	If yes, explain why and provide information on the other structure lengths that were considered.		
2)	Should a shorter structure be considered for this crossing? Yes \Boxedown No \Boxedown If no, explain why not		
	If yes, explain why and provide information on other structure lengths that were considered.		

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BRIDGE PROJECT QUALITY CONTROL (QC) AND QUALITY ASSURANCE (QA) CERTIFICATION

PROJECTS HAVING GRADE INSPECTIONS AFTER JUNE 1, 2016 WILL REQUIRE QC/QA CERTIFICATION

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This form must be completed, signed, sealed, and certified by both the Project (Design) Engineer for Quality Control (QC) and the Quality Assurance (QA) Engineer. Upon completion, the local agency forwards the original document, including seals and signatures, to MDOT LAP before construction funds can be obligated.

ELIGIBLE APPLICANT AGENCY	DATE
ROUTE NAME	
CROSSING	

Refer to Federal Highway Administration (FHWA), Guidance on Quality Control and Quality Assurance (QC/QA) In Bridge Design (H-08-17) located at: http://www.fhwa.dot.gov/bridge/h0817.pdf

Quality Control (QC) shall include at a minimum:

- A supervisor or team leader responsible for determining the technical knowledge and experience of the designer/checker for a specific design.
- A documented program with detailed procedures, standards, and policies for oversight of the bridge design.
- Design calculations, checked calculations, review comments, and other pertinent documents.
- Bridge plan sheets shall include the names or initials of the designer and checker and the most current revision date. Names of the drafter and reviewer should also be added to the plans. Bridge design plans shall be signed and sealed by a Licensed Professional Engineer in the State of Michigan.
- Unique special provisions shall include the author's and reviewer's initials and date authored and checked.

Quality Assurance (QA) shall include at a minimum:

- Independent check of design calculations, unique special provisions by a qualified person or consultant other than the designer.
- Participation in field engineering reviews during design.

Based on the information included on this page, the designer/design consultant has adequately completed Quality Control and Quality Assurance for this project.

Signature (Project Design Engineer - QC)	Seal
Typed name and date:	
Signature (Engineer - QA)	Seal
Typed name and date:	