



NC DEPARTMENT OF TRANSPORTATION
 DIVISION OF HIGHWAYS
 STRUCTURE MANAGEMENT UNIT

ATTENTION: **VERT CLR - NO CHANGE**

Structure Safety Report

Routine Element Inspection

COUNTY: GASTON STRUCTURE NUMBER: 350120 FREQUENCY: 24 MONTHS

FACILITY CARRIED: I85 MILE POST: _____

LOCATION: 1.5 MI. N. JCT. US29

FEATURE INTERSECTED: US321

LATITUDE: 35° 17' 0.89" LONGITUDE: 81° 11' 16.09"

SUPERSTRUCTURE: RC DECK ON I-BEAMS & PL.GIRDERS, SIP FORMS, APPROACH SLABS

SUBSTRUCTURE: E.BTS:RC CAP ON STL.PILES,INT.BTS:RC POST & BEAM W/PILE FTGS

SPANS: 1@40'0 NONCOMP., 1@61'0, 2@54'0, 1@75'6, 1@56'6 COMPOSITE

FRACTURE CRITICAL TEMPORARY SHORING SCOUR CRITICAL SCOUR PLAN OF ACTION

PRESENT CONDITION: Good INSPECTION DATE: 10/08/2014

POSTED SV: Not Posted POSTED TTST: Not Posted

OTHER SIGNS PRESENT: NONE



Sign noticed issued for	Number Required
<u>NO</u> WEIGHT LIMIT	<u>0</u>
<u>NO</u> DELINEATORS	<u>0</u>
<u>NO</u> NARROW BRIDGE	<u>0</u>
<u>NO</u> ONE LANE BRIDGE	<u>0</u>
<u>NO</u> LOW CLEARANCE	<u>0</u>

SOUTH APPROACH

INSPECTED BY DEREK RICKUS	SIGNATURE 	ASSISTED BY ERIC PATTERSON
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Span Element Report

Structure Number: 350120

Inspection Date: 10/08/2014

Span Number 1

Span Length 40 Feet

Number of Beams/Girders: 18

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	4,924	4,894	0	30	0	30	3326
107		Steel Open Girder/Beam	720	720	0	0	0	0	3314
515	107	Steel Protective Coating	332	332	0	0	0	0	5603
215		Reinforced Concrete Abutment	141	141	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	141	135	6	0	0	6	3348
302		Compression Joint Seal	134	0	134	0	0	134	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
321		Reinforced Concrete Approach Slabs	1,463	1,433	0	30	0	30	3353
331		Reinforced Concrete Bridge Railing	120	120	0	0	0	0	3318
510		Wearing Surface	4,680	4,680	0	0	0	0	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Span Number 2

Span Length 61 Feet

Number of Beams/Girders: 18

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	7,509	7,479	0	30	0	30	3326
107		Steel Open Girder/Beam	1,098	1,098	0	0	0	0	3314
515	107	Steel Protective Coating	9180	9180	0	0	0	0	5603
205		Reinforced Concrete Column	9	9	0	0	0	0	3348
215		Reinforced Concrete Abutment	131	131	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	130	127	3	0	0	3	3348
302		Compression Joint Seal	134	0	134	0	0	134	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
331		Reinforced Concrete Bridge Railing	183	183	0	0	0	0	3318
510		Wearing Surface	7,137	7,136	0	1	0	1	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Span Number 3

Span Length 54 Feet

Number of Beams/Girders: 18

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	6,647	6,617	0	30	0	30	3326
107		Steel Open Girder/Beam	972	972	0	0	0	0	3314
515	107	Steel Protective Coating	8136	8136	0	0	0	0	5603
205		Reinforced Concrete Column	9	7	0	2	0	2	3348
215		Reinforced Concrete Abutment	131	131	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	130	124	6	0	0	6	3348
302		Compression Joint Seal	134	0	134	0	0	134	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
331		Reinforced Concrete Bridge Railing	162	162	0	0	0	0	3318
510		Wearing Surface	6,318	6,318	0	0	0	0	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Span Number 4

Span Length 54 Feet

Number of Beams/Girders: 18

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	6,642	6,612	0	30	0	30	3326
107		Steel Open Girder/Beam	972	972	0	0	0	0	3314
515	107	Steel Protective Coating	4068	4068	0	0	0	0	5603
205		Reinforced Concrete Column	9	9	0	0	0	0	3348
215		Reinforced Concrete Abutment	131	131	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	130	130	0	0	0	0	3348
302		Compression Joint Seal	134	0	134	0	0	134	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
331		Reinforced Concrete Bridge Railing	162	162	0	0	0	0	3318
510		Wearing Surface	6,318	6,318	0	0	0	0	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Span Number 5**Span Length 75.5 Feet****Number of Beams/Girders: 18**

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	9,293	9,263	0	30	0	30	3326
107		Steel Open Girder/Beam	1,368	1,368	0	0	0	0	3314
515	107	Steel Protective Coating	0	0	0	0	0	0	5603
205		Reinforced Concrete Column	9	9	0	0	0	0	3348
215		Reinforced Concrete Abutment	131	131	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	130	124	0	6	0	6	3348
302		Compression Joint Seal	134	0	134	0	0	134	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
331		Reinforced Concrete Bridge Railing	228	228	0	0	0	0	3318
510		Wearing Surface	0	0	0	0	0	0	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Span Number 6**Span Length 56.5 Feet****Number of Beams/Girders: 18**

Element Number	Parent Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code
12		Reinforced Concrete Deck	6,955	6,925	0	30	0	30	3326
107		Steel Open Girder/Beam	1,008	1,008	0	0	0	0	3314
515	107	Steel Protective Coating	470	470	0	0	0	0	5603
205		Reinforced Concrete Column	9	9	0	0	0	0	3348
215		Reinforced Concrete Abutment	149	149	0	0	0	0	3350
234		Reinforced Concrete Pier Cap	279	265	0	14	0	14	3348
302		Compression Joint Seal	134	-134	268	0	0	268	3310
310		Elastomeric Bearing	36	36	0	0	0	0	3334
321		Reinforced Concrete Approach Slabs	1,463	1,462	0	1	0	1	3353
331		Reinforced Concrete Bridge Railing	171	171	0	0	0	0	3318
510		Wearing Surface	0	0	0	0	0	0	2816

"Near" Approach and Substructure quantities have been include for reporting purposes. The last span will also include End Bent 2 and Far Approach quantities where applicable

Superstructure Detailed Element Quantities

Structure Number: 350120

Inspection Date: 10/08/2014

Span Number 1

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	40	40	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	40	40	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	40	40	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	40	40	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	40	40	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	332	332	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 1

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Span Number 2

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Deck	1	12	Reinforced Concrete Deck	7509	7479	0	30	0	30	3326	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	1	331	Reinforced Concrete Bridge Railing	61	61	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	2	331	Reinforced Concrete Bridge Railing	61	61	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	3	331	Reinforced Concrete Bridge Railing	61	61	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Wearing Surfaces	1	510	Wearing Surface	7137	7136	0	1	0	1	2816	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Beam	1	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	2	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	3	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	4	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	5	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	6	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	7	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	8	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	9	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	10	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	11	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	12	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	13	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	

Span Number 2

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	61	61	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	510	510	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 2

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Span Number 3

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Deck	1	12	Reinforced Concrete Deck	6647	6617	0	30	0	30	3326	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	1	331	Reinforced Concrete Bridge Railing	54	54	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	2	331	Reinforced Concrete Bridge Railing	54	54	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bridge Rail	3	331	Reinforced Concrete Bridge Railing	54	54	0	0	0	0	3318	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Wearing Surfaces	1	510	Wearing Surface	6318	6318	0	0	0	0	2816	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Beam	1	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	2	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	3	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	4	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	5	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	6	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	7	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	8	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	9	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	10	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	11	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	12	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	13	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	

Span Number 3

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	452	452	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 3

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Span Number 4

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	54	54	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 4

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Span Number 5

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	76	76	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	76	76	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	76	76	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	76	76	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	76	76	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 5

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Span Number 6

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Beam	14	107	Steel Open Girder/Beam	56	56	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	15	107	Steel Open Girder/Beam	56	56	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	16	107	Steel Open Girder/Beam	56	56	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	17	107	Steel Open Girder/Beam	56	56	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	0	0	0	0	0	0	5603	
<input checked="" type="checkbox"/> Beam	18	107	Steel Open Girder/Beam	56	56	0	0	0	0	3314	<input type="checkbox"/> Requested
Protective System		515	Steel Protective Coating	470	470	0	0	0	0	5603	
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	1	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	2	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	3	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	4	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	5	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	6	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	7	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	8	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	9	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	10	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested

Span Number 6

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Bearing Device	11	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	12	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	13	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	14	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	15	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	16	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	17	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Bearing Device	18	310	Elastomeric Bearing	1	1	0	0	0	0	3334	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	0	-134	134	0	0	134	3310	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Expansion Joints	1	302	Compression Joint Seal	134	0	134	0	0	134	3310	<input type="checkbox"/> Requested

Superstructure Element Defect Descriptions

Structure Number: 350120

Inspection Date: 10/08/2014

Span Number 1

Span	Deck	1	Component Name:	Reinforced Concrete Deck				
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Element: 12 Name Reinforced Concrete Deck Qty: 4924 Lvl 2: 0 Lvl 3: 30 Lvl 4: 0 Maint. Qty: 30

Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span	Expansion Joints	1	Component Name:	Compression Seal				
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Element: 302 Name Compression Joint Seal Qty: 134 Lvl 2: 134 Lvl 3: 0 Lvl 4: 0 Maint. Qty: 134

Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span Number 2

Span	Deck	1	Component Name:	Reinforced Concrete Deck				
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Element: 12 Name Reinforced Concrete Deck Qty: 7509 Lvl 2: 0 Lvl 3: 30 Lvl 4: 0 Maint. Qty: 30

Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span	Wearing Surfaces	1	Component Name:	Concrete Wearing Surface				
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Element: 510 Name Wearing Surface Qty: 7137 Lvl 2: 0 Lvl 3: 1 Lvl 4: 0 Maint. Qty: 1

Defect Description:

1 Square Feet of Delamination/Spall/Patched Area/Pothole (Wearing Surfaces): Spall 1 in. deep or greater or 6 in. diameter or greater. Patched area that is unsound or showing distress. Full depth pothole. NB LANES

Span	Expansion Joints	1	Component Name:	Compression Seal				
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Element: 302 Name Compression Joint Seal Qty: 134 Lvl 2: 134 Lvl 3: 0 Lvl 4: 0 Maint. Qty: 134

Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span Number 3

Span	Deck	1	Component Name:	Reinforced Concrete Deck				
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Element: 12 Name Reinforced Concrete Deck Qty: 6647 Lvl 2: 0 Lvl 3: 30 Lvl 4: 0 Maint. Qty: 30

Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span	Expansion Joints	1	Component Name:	Compression Seal				
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Element: 302 Name Compression Joint Seal Qty: 134 Lvl 2: 134 Lvl 3: 0 Lvl 4: 0 Maint. Qty: 134

Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span Number 4

Span	Deck	1	Component Name:	Reinforced Concrete Deck				
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Element: 12 Name Reinforced Concrete Deck Qty: 6642 Lvl 2: 0 Lvl 3: 30 Lvl 4: 0 Maint. Qty: 30

Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span 4	Expansion Joints 1	Component Name: Compression Seal
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Element: 302	Name Compression Joint Seal	Qty: 134	Lvl 2: 134	Lvl 3: 0	Lvl 4: 0	Maint. Qty 134
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Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span Number 5

Span 5	Deck 1	Component Name: Reinforced Concrete Deck
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Element: 12	Name Reinforced Concrete Deck	Qty: 9293	Lvl 2: 0	Lvl 3: 30	Lvl 4: 0	Maint. Qty 30
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Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span 5	Expansion Joints 1	Component Name: Compression Seal
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Element: 302	Name Compression Joint Seal	Qty: 134	Lvl 2: 134	Lvl 3: 0	Lvl 4: 0	Maint. Qty 134
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Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span Number 6

Span 6	Deck 1	Component Name: Reinforced Concrete Deck
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Element: 12	Name Reinforced Concrete Deck	Qty: 6955	Lvl 2: 0	Lvl 3: 30	Lvl 4: 0	Maint. Qty 30
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Defect Description:

30 Square Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGES.

Span 6	Expansion Joints 1	Component Name: Compression Seal
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Element: 302	Name Compression Joint Seal	Qty: 0	Lvl 2: 134	Lvl 3: 0	Lvl 4: 0	Maint. Qty 134
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Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Span 6	Expansion Joints 1	Component Name: Compression Seal
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Element: 302	Name Compression Joint Seal	Qty: 134	Lvl 2: 134	Lvl 3: 0	Lvl 4: 0	Maint. Qty 134
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Defect Description:

67 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.
67 Feet of Seal Cracking: Surface crack.

Substructure Detailed Element Quantites

Structure Number: 350120

Inspection Date: 10/08/2014

End Bent 1

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Abutments	1	215	Reinforced Concrete Abutment	141	141	0	0	0	0	3350	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	141	135	6	0	0	6	3348	<input type="checkbox"/> Requested

Bent 1

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	130	127	3	0	0	3	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	1	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	2	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	3	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	4	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	5	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	6	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	7	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	8	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	9	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested

Bent 2

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	130	124	6	0	0	6	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	1	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	2	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	3	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	4	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	5	205	Reinforced Concrete Column	1	0	0	1	0	1	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	6	205	Reinforced Concrete Column	1	0	0	1	0	1	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	7	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	8	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	9	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested

Bent 3

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	130	130	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	1	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	2	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	3	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	4	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	5	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	6	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	7	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	8	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	9	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested

Bent 4

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	130	124	0	6	0	6	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	1	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	2	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	3	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	4	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	5	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	6	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	7	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	8	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	9	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested

Bent 5

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	130	124	0	6	0	6	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	1	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	2	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	3	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	4	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	5	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	6	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	7	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	8	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Piles and Columns	9	205	Reinforced Concrete Column	1	1	0	0	0	0	3348	<input type="checkbox"/> Requested

End Bent 2

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Abutments	1	215	Reinforced Concrete Abutment	149	149	0	0	0	0	3350	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Caps	1	234	Reinforced Concrete Pier Cap	149	141	0	8	0	8	3348	<input type="checkbox"/> Requested

Substructure Element Defect Descriptions

Structure Number: 350120

Inspection Date: 10/08/2014

End Bent 1

End Bent 1	Row 1	Caps	1							
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Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 141 **Lvl 2:** 6 **Lvl 3:** 0 **Lvl 4:** 0 **Maint. Qty:** 6

Defect Description:

6 Feet of Cracking (RC and Other): Width 0.012-0.05 in. or spacing of 1.0-3.0 ft.

Bent 1	Row 1	Caps	1							
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Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 130 **Lvl 2:** 3 **Lvl 3:** 0 **Lvl 4:** 0 **Maint. Qty:** 3

Defect Description:

SPALL REPAIR

Bent 2	Row 1	Caps	1							
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Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 130 **Lvl 2:** 6 **Lvl 3:** 0 **Lvl 4:** 0 **Maint. Qty:** 6

Defect Description:

6 Feet of Cracking (RC and Other): Width 0.012-0.05 in. or spacing of 1.0-3.0 ft.

Bent 2	Row 1	Piles and Columns	5							
--------	-------	-------------------	---	--	--	--	--	--	--	--

Element: 205 **Name** Reinforced Concrete Column **Qty:** 1 **Lvl 2:** 0 **Lvl 3:** 1 **Lvl 4:** 0 **Maint. Qty:** 1

Defect Description:

1 Each of Delamination/Spall/Patched Area: Spall greater than 1 in. deep or greater than 6 in. diameter. Patched area that is unsound or showing distress. Does not warrant structural review.

Bent 2	Row 1	Piles and Columns	6							
--------	-------	-------------------	---	--	--	--	--	--	--	--

Element: 205 **Name** Reinforced Concrete Column **Qty:** 1 **Lvl 2:** 0 **Lvl 3:** 1 **Lvl 4:** 0 **Maint. Qty:** 1

Defect Description:

1 Each of Delamination/Spall/Patched Area: Spall greater than 1 in. deep or greater than 6 in. diameter. Patched area that is unsound or showing distress. Does not warrant structural review.

Bent 4	Row 1	Caps	1							
--------	-------	------	---	--	--	--	--	--	--	--

Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 130 **Lvl 2:** 0 **Lvl 3:** 6 **Lvl 4:** 0 **Maint. Qty:** 6

Defect Description:

6 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. SPALLING

Bent 5	Row 1	Caps	1							
--------	-------	------	---	--	--	--	--	--	--	--

Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 130 **Lvl 2:** 0 **Lvl 3:** 6 **Lvl 4:** 0 **Maint. Qty:** 6

Defect Description:

6 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. SPALL REPAIR LOOSE.

End Bent 2	Row 1	Caps	1							
------------	-------	------	---	--	--	--	--	--	--	--

Element: 234 **Name** Reinforced Concrete Pier Cap **Qty:** 149 **Lvl 2:** 0 **Lvl 3:** 8 **Lvl 4:** 0 **Maint. Qty:** 8

Defect Description:

8 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft.

Approach Detailed Element Quantities

Structure Number: 350120

Inspection Date: 10/08/2014

Element Location	Location Number	Element Number	Element Name	Total Quantity	Level 1 Quantity	Level 2 Quantity	Level 3 Quantity	Level 4 Quantity	Maint. Quantity	Maint. Code	Priority Maintenance
<input checked="" type="checkbox"/> Approach	1	321	Reinforced Concrete Approach Slabs	1463	1433	0.000	30.000	0.000	30	3353	<input type="checkbox"/> Requested
<input checked="" type="checkbox"/> Approach	2	321	Reinforced Concrete Approach Slabs	1463	1462	0.000	1.000	0.000	1	3353	<input type="checkbox"/> Requested

Approach Element Defect Descriptions

Structure Number: 350120

Inspection Date: 10/08/2014

Approach 1

Element: 321 **Name** Reinforced Concrete Approach **Qty:** 1463 **Lvl 2:** 0.000 **Lvl 3** 30.000 **Lvl 4** 0.000 **Maint. Qty** 30
Defect Description: Slabs

30 Square Feet of Cracking: Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGE

Approach 2

Element: 321 **Name** Reinforced Concrete Approach **Qty:** 1463 **Lvl 2:** 0.000 **Lvl 3** 1.000 **Lvl 4** 0.000 **Maint. Qty** 1
Defect Description: Slabs

1 Square Feet of Delamination/Spall/Patched: Spall greater than 1 in. deep or greater than 6 in. diameter. Patched area that is unsound or showing distress. Does not warrant structural review.

National Bridge and NC Inspection Items

Structure Number: 350120

Inspection Date: 10/08/2014

National Bridge Inventory Items

Item	Grade Scale	Grade
Item 58: Deck	0 - 9 , N	7
Item 59: Superstructure	0 - 9 , N	7
Item 60: Substructure	0 - 9 , N	6
Item 61: Channel and Channel Protection	0 - 9 , N	
Item 62: Culvert	0 - 9 , N	
Item 71: Waterway Adequacy	0 - 9 , N	
Item 72: Approach Roadway Alignment	0 - 9 , N	8

Note: If NBI Inspection Item is not present, code NBI item with "N"

NC SMU Inspection Items

Item	Grade Scale	Grade	Maint. Qty.	Maint. Code
Deck Debris	G, F, P, or C	G	0	3376
Drainage System	G, F, P, or C	G	0	3332
Utilities	G, F, P, or C			
Slope Protection	G, F, P, or C	G	0	3352
Wingwall	G, F, P, or C			
Scour	G, F, P, or C			
Field Scour Evaluation				
Drift	G, F, P, or C		0	3366
Fender System	G, F, P, or C		0	3364
Response to Live Load	G, F, P, or C	G		
Estimated Remaining Life	0 - 100 Years	45		

Note: If NC SMU Inspection Item is not present, leave NC SMU item blank

Inspection Information

Item	Grade Scale	Grade
Regulatory Sign Noticed Issued	YES/NO	N
Priority Maintenance Request Submitted	YES/NO	N
Inspection Time	Hours	11
Traffic Control Time	Hours	0
Snooper Time	Hours	0
Ladder Used	YES/NO	N
Bucket Truck Used	YES/NO	N
Boat Used	YES/NO	N
Other Equipment Used	YES/NO	N

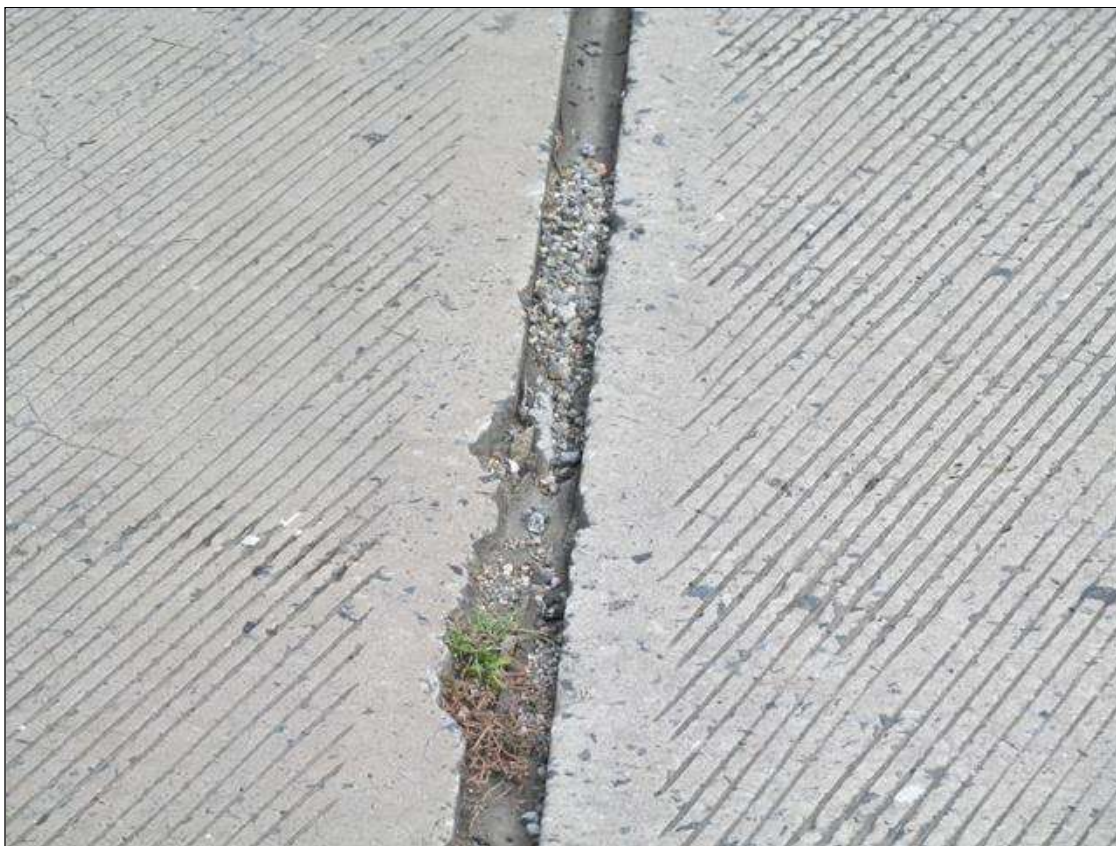
National Bridge and NC SMU Inspection Item Details

Structure Number: 350120

Inspection Date: 10/08/2014

Item	Snooper Used	Grade	N	Maint Code	Qty.	0
------	--------------	-------	---	------------	------	---

Details SNOOPER NEEDED FOR NEXT INSPECTION



15 Square Feet of Cracking: Width greater than 0.05 in. or spacing of less than 1 ft. CHIPPING ALONG JOINT EDGE



Expansion Joint 1 : 68 Feet of Seal Adhesion: Adhered for more than 50% of the joint height.



Bent 1 Cap : SPALL REPAIR



Bent 2 Cap : 6 Feet of Cracking (RC and Other): Width 0.012-0.05 in. or spacing of 1.0-3.0 ft.



Bent 2 Pile 5: 1 Each of Delamination/Spall/Patched Area: Spall greater than 1 in. deep or greater than 6 in. diameter. Patched area that is unsound or showing distress. Does not warrant structural review.



Bent 4 Cap : 6 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. SPALLING



Span 2 Wearing Surface: 1 Square Feet of Delamination/Spall/Patched Area/Pothole (Wearing Surfaces): Spall 1 in. deep or greater or 6 in. diameter or greater. Patched area that is unsound or showing distress. Full depth pothole. NB LANES



Bent 5 Cap : 6 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft. SPALL REPAIR LOOSE.



End Bent 2 Cap : 8 Feet of Cracking (RC and Other): Width greater than 0.05 in. or spacing of less than 1 ft.



1 Square Feet of Delamination/Spall/Patched: Spall greater than 1 in. deep or greater than 6 in. diameter. Patched area that is unsound or showing distress. Does not warrant structural review.



BENT 5



ABUT 2



NORTH APPROACH



SOUTH APPROACH



GR END AT SE CORNER. GR AT NE & NW CORNERS TIED TO EXTENDED RUNS.



ABUT 1



BENT 1



BENT 2



LOOKING WEST



BENT 3



LOOKING EAST



BENT 4



TYP GR CONNECTION FOR SE, NE, & NW CORNERS.



NO GR, SW CORNER



GR LOOKING SOUTH



GR LOOKING NORTH

NATIONAL BRIDGE INVENTORY----- STRUCTURE INVENTORY AND APPRAISAL

Run Date: 01/13/2015

IDENTIFICATION

(1) STATE NAME -NORTH CAROLINA BRIDGE **350120**
 (8) STRUCTURE NUMBER(FEDERAL) 00000000710120
 (5) INVENTORY ROUTE (ON/UNDER) - ON 11000850
 (2) STATE HIGHWAY DEPARTMENT DISTRICT 1
 (3) COUNTY CODE 71 (4) PLACE CODE 25580
 (6) FEATURE INTERSECTED - US321
 (7) FACILITY CARRIED I85
 (9) LOCATION 1.5 MI. N. JCT. US29
 (11) MILEPOINT 17
 (16) LAT 35° 17' 0.89" (17) LONG 81° 11' 16.09"
 (98) BORDER BRIDGE STATE CODE PCT SHARE
 (99) BORDER BRIDGE STRUCTURE NO

SUFFICIENCY RATING = 78.45
 STATUS = Not Deficient

CLASSIFICATION **CODE**

(112) NBIS BRIDGE SYSTEM - YES
 (104) HIGHWAY SYSTEM Is on the NHS 1
 (26) FUNCTIONAL CLASS - Arterial - Interstate 11
 (100) STRAHNET HIGHWAY - Interstate STRAHNET Route 1
 (101) PARALLEL STRUCTURE - No Parallel Structure N
 (102) DIRECTION OF TRAFFIC - 2-way Traffic 2
 (103) TEMPORARY STRUCTURE -
 (110) DESIGNATED NATIONAL NETWORK - On the National Network 1
 (20) TOLL On Free Road 3
 (31) MAINTAIN - State Highway Agency 01
 (22) OWNER - State Highway Agency 01
 (37) HISTORICAL SIGNIFICANCE - Not Eligible 5

STRUCTURE TYPE AND MATERIAL

(43) STRUCTURE TYPE MAIN: Steel
 TYPE - Stringer Mutlibeam or Girder CODE 302
 (44) STRUCTURE TYPE APPR :
 TYPE - CODE 000
 (45) NUMBER OF SPANS IN MAIN UNIT 6
 (46) NUMBER OF APPROACH SPANS
 (107) DECK STRUCTURE TYPE - 1 CODE
 (108) WEARING SURFACE / PROTECTIVE SYSTEM :
 (A) TYPE OF WEARING SURFACE - CODE
 (B) TYPE OF MEMBRANE - CODE
 (C) TYPE OF DECK PROTECTION - CODE

CONDITION **CODE**

(58) DECK 7
 (59) SUPERSTRUCTURE 7
 (60) SUBSTRUCTURE 6
 (61) CHANNEL & CHANNEL PROTECTION N
 (62) CULVERTS N

LOAD RATING AND POSTING **CODE**

(31) DESIGN LOAD HS 20 + MOD 6
 (63) OPERATING RATING METHOD - Load Factor 1
 (64) OPERATING RATING - HS-36 64
 (65) INVENTORY RATING METHOD - Load Factor 1
 (66) INVENTORY RATING - HS-21 38
 (70) BRIDGE POSTING - No Posting Required 5
 (41) STRUCTURE OPEN, POSTED ,OR CLOSED A
 DESCRIPTION - Open, No Restriction

AGE AND SERVICE

(27) YEAR BUILT 1962
 (106) YEAR RECONSTRUCTED 1994
 (42) TYPE OF SERVICE : ON - Overpass - Interchange
 UNDER - Highway CODE 61
 (28) LANES: ON STRUCTURE 8 UNDER STRUCTURE 5
 (29) AVERAGE DAILY TRAFFIC 50000
 (30) YEAR OF ADT 2013 (109) TRUCK ADT PCT 16%
 (19) BYPASS OR DETOUR LENGTH 1 MI

APPRAISAL **CODE**

(67) STRUCTURAL EVALUATION 6
 (68) DECK GEOMETRY 6
 (69) UNDERCLEARANCES, VERTI & HORIZ 6
 (71) WATERWAY ADEQUACY N
 (72) APPROACH ROADWAY ALIGNMENT 8
 (36) TRAFFIC SAFETY FEATURES 1111
 (113) SCOUR CRITICAL BRIDGES N

GEOMETRIC DATA

(48) LENGTH OF MAXIMUM SPAN 74 FT
 (49) STRUCTURE LENGTH 341 FT
 (50) CURB OR SIDEWALK: LEFT 0 FT RIGHT 0 FT
 (51) BRIDGE ROADWAY WIDTH CURB TO CURB 117 FT
 (52) DECK WIDTH OUT TO OUT 123.083 FT
 (32) APPROACH ROADWAY WIDTH (W/SHOULDERS) 117 FT
 (33) BRIDGE MEDIAN - No Median CODE 3
 (34) SKEW 24° (35) STRUCTURE FLARED 0
 (10) INVENTORY ROUTE MIN VERT CLEAR 999.9 FT
 (47) INVENTORY ROUTE TOTAL HORIZ CLEAR 58.5 FT
 (53) MIN VERT CLEAR OVER BRIDGE RDWY 999.9 FT
 (54) MIN VERT UNDERCLEAR REF Highway 15.583 FT
 (55) MIN LAT UNDERCLEAR RT REF Highway 14.25 FT
 (56) MIN LAT UNDERCLEAR LT REF - 6.667 FT

PROPOSED IMPROVEMENTS

(75) TYPE OF WORK - CODE
 (76) LENGTH OF STRUCTURE IMPROVEMENT
 (94) BRIDGE IMPROVEMENT COST
 (95) ROADWAY IMPROVEMENT COST
 (96) TOTAL PROJECT COST
 (97) YEAR OF IMPROVEMENT COST ESTIMATE
 (114) FUTURE ADT 100000 (115) YEAR FUTURE ADT 2025

INSPECTIONS

(90) INSPECTION DATE 10/08/2014
 (92) CRITICAL FEATURE INSPECTION : (93) CFI DATE
 A) FRACTURE CRIT DETAIL - NO A)
 B) UNDERWATER INSP - NO B)
 C) OTHER SPECIAL INSP NO C)
 SCOUR

NAVIGATION DATA

(38) NAVIGATION CONTROL - Not Applicable CODE N
 (111) PIER PROTECTION - CODE
 (39) NAVIGATION VERTICAL CLEARANCE 0
 (116) VERT - LIFT BRIDGE NAV MIN VERT CLEAR FT
 (40) NAVIGATION HORIZONTAL CLEARANCE 0 FT

Structure No: 350120

County: GASTON

Run Date:

Span Number	Feature Intersected	Inventory Route	Minimum Maximum Vertical Clearance	Milepoint	Base Highway Network	LRS Inventory Route	Toll	Functional Classification	Numer of Lanes	Average Daily Traffic	Year of Average Daily Traffic	Total Horizontal Clearance	See Note 1							Highway System of Route
													Reference Feature	Minimum Vertical Underclearance	Right Lateral Underclearance	Left Lateral Underclearance	Underclearance Appraisal Grade	STRAHNET Highway Designator	Direction of Traffic	
	6	5	10	11	12	13	20	26	28	29	30	47	54A	54	55	56	69	100	102	104
2	US 321 SBL	21003210	16.33		1	20321		14	3	22000	2012	54.67	H	15.58	22	6.67	9	0	1	1
3	US 321 NBL	21003210	15.58	0	1	20321		14	2	22000	2012	46.92	H	15.58	14.25	6.67	9	0	1	1

Note 1: Items 54, 55, and 56 are not reported FHWA under route data points but are collected for each under route to determine the minimum value for Underclearance Appraisal Item 69. The under route that generates the lowest Underclearance Appraisal value will be reported on the Facility Carried record.

BRIDGE MANAGEMENT UNIT

DATA ON EXISTING STRUCTURE

Run Date: 01/13/2015

COUNTY : GASTON DIVISION : 12 DISTRICT : 1 STRUCTURE NUMBER : 350120 LENGTH : 341 FEET

ROUTE CARRIED : I85 FEATURE INTERSECTED : US321

LOCATED : 1.5 MI. N. JCT. US29 BRIDGE NAME : CITY : GASTONIA

FUNC. CLASS : 11 SYST.ON : FA SYST.UNDER : NFA ADT & YR : 50000 2013 RAIL TYPE : LT 41 RT 41

BUILT : 1962 BY : SHC PROJ : 8.16316 FED.AID PROJ : IM-NHF-85-1 DESIGN LOAD : HS 20 + MOD

REHAB : 1994 BY : DOH PROJ : 8.T810703 ALIGNMENT : TAN SKEW : 66 LANES : ON 8 UNDER 5

NAVIGATION : VC 0 FT HC 0 FT HT. CRN. TO BED : 0 FT WATER DEPTH : 0 FT

SUPERSTRUCTURE : RC DECK ON I-BEAMS & STL.PL.GIRDERS (S.I.P. METAL FORMS)

SUBSTRUCTURE : E.BTS:RC CAPS/H-PILES; INT.BTS:RC POST & BEAM /PILE FTGS.

SPANS : 1@40', 1@61', 2@54', 1@75'-6, 1@56'-6

BEAMS OR GIRDERS : 18 LINES @ VAR.CTS:SPAN 1-4,6:30 I-BEAMS, SPAN 5:36 TO 40.25 STL.PL.GDRS.

FLOOR : 8.25 RC/NO AWS ENCROACHMENT : DECK (OUT TO OUT) : 123.083 FT

CLEAR ROADWAY : 117 FT BETWEEN RAILS : 120 FT SIDEWALK OR CURB : LT 0 FT RT 0 FT

VERT.CL.OVER : 999.9 FT

INV.RTG. : HS-21 OPE.RTG. : HS-36 CONTR.MEMBER : Int.bmsSpF POSTED : SV TTST DATE

SYSTEM : Primary Interstate GREEN LINE ROUTE : Y

UNDER ROUTES AND CLEARANCES

Span	Route Description	Vertical Clearances		Horizontal Clearances		
		MMVC	MVC	Total	Left	Right
2	US 321 SBL	16.3330	15.5830	54.6670	6.6670	22
3	US 321 NBL	15.5830	15.5830	46.9170	6.6670	14.25

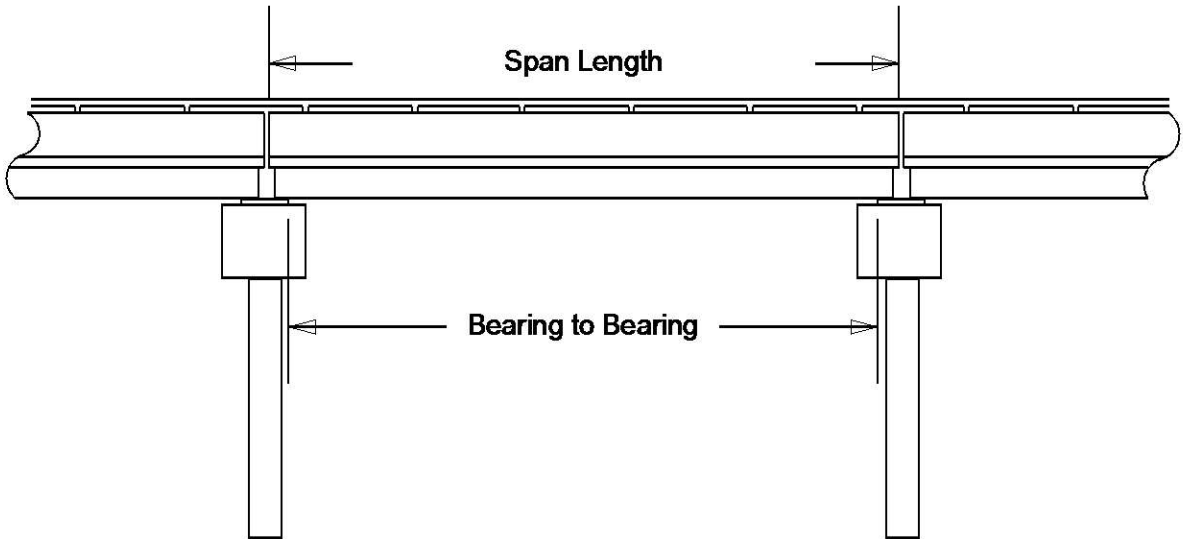
Note: All measurements are in feet.

REMARKS :

Structure Data Worksheet

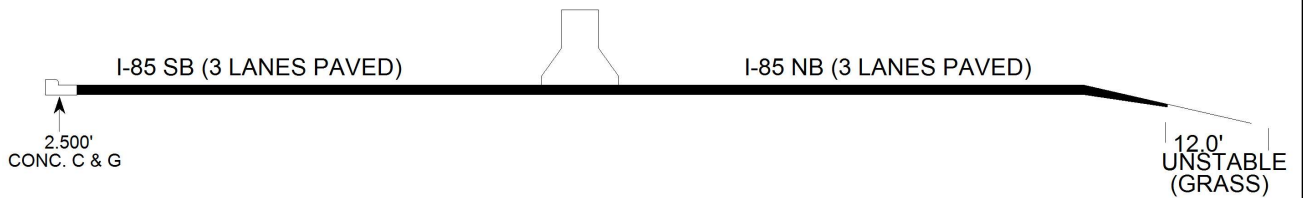
Spans

County: GASTON Structure No: 350120 Date: _____ Inspected By: DCR



Span No	Span Length	Bearing to Bearing	Comments
1	40.000'	37.958'	
2	61.000'	59.875'	
3	54.000'	52.958'	
4	54.000'	53.125'	
5	75.500'	74.250'	
6	56.500'	54.708'	NBIS = 338.500'

Bridge Inspection Field Sketch



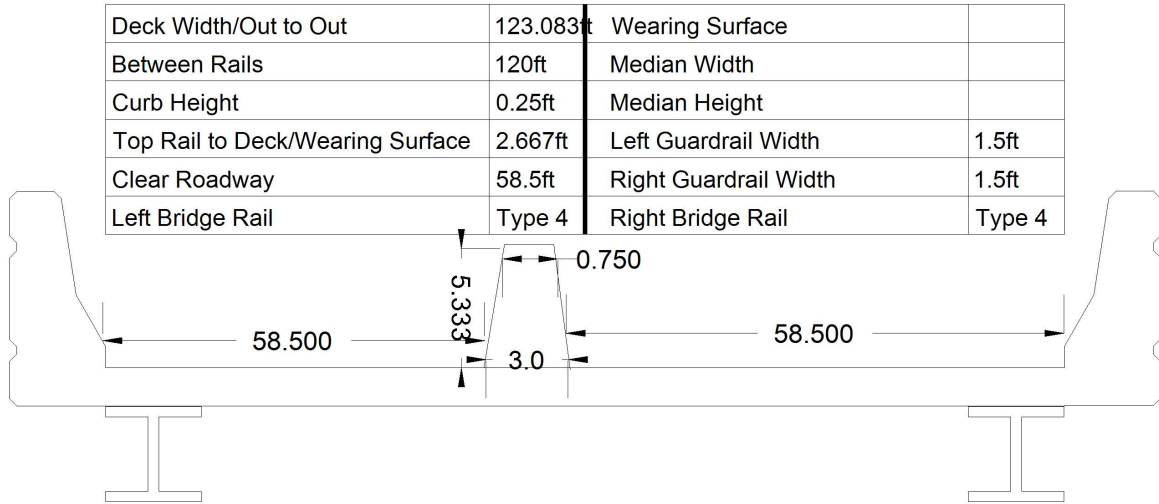
SECTION @ 150' FROM SOUTH FILLFACE

Left Lanes			
Roadway	36ft Wide	3 Paved Lanes	South Bound
Left Shoulder	8.333ft Wide	8.333ft Paved	0ft Unpaved
Right Shoulder	15.5ft Wide	15.5ft Paved	0ft Unpaved
Left Guardrail			
Right Guardrail			
Median	3ft Wide	5.333ft High	
Right Lanes			
Roadway	36ft Wide	3 Paved Lanes	North Bound
Left Shoulder	8.333ft Wide	8.333ft Paved	0ft Unpaved
Right Shoulder	25ft Wide	13ft Paved	12ft Unpaved
Left Guardrail			
Right Guardrail			

VERIFIED BY DEREK RICKUS ON 10-8-2014

Title APPROACH ROADWAY	Description LOOKING NORTH
Bridge No: 350120	Drawn By: DJA
Date: 9/4/08	File Name: S0146030625

Bridge Inspection Field Sketch



Measurements for Span #	1		
Deck Thickness	0.688	Left Overhang	3.25
Top of Rail to Bottom of Beam	6	Right Overhang	3.25

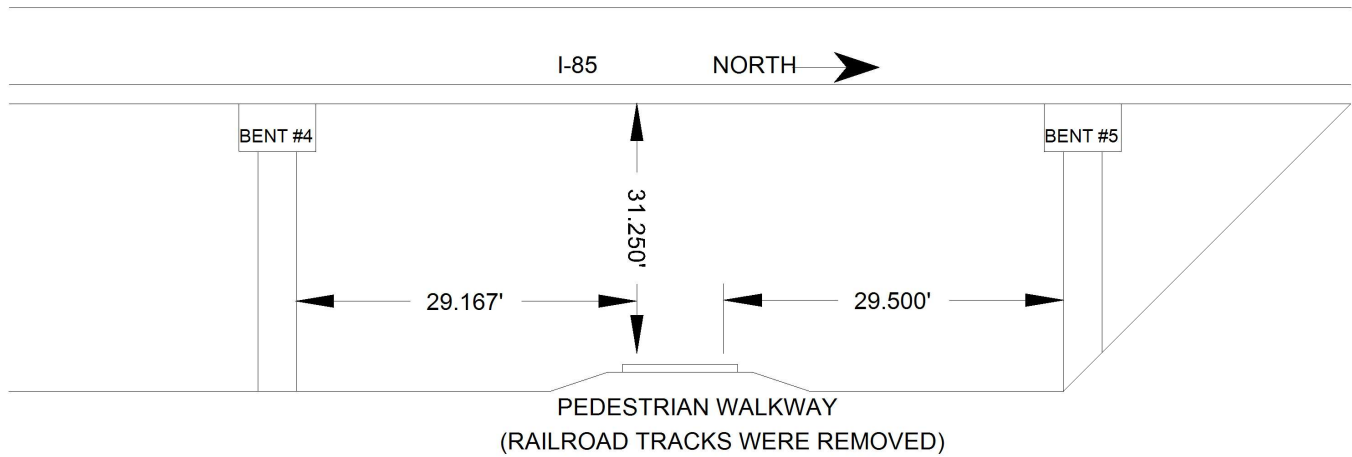
Beam No	Beam Type	Spacing	Comments
1	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
2	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
3	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
4	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
5	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
6	Steel I Beam	4.167 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
7	Steel I Beam	7.000 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
8	Steel I Beam	7.000 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
9	Steel I Beam	7.000 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
10	Steel I Beam	7.000 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
11	Steel I Beam	7.000 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
12	Steel I Beam	4.083 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
13	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
14	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
15	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
16	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
17	Steel I Beam	7.333 ft.	0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04
18	Steel I Beam		0.875 ft.W X 2.458 ft.H,FLANGE=0.063 ft.,WEB=0.04

NOTE : ABOVE BEAM DIMENSIONS ARE FOR SPANS # 1-4 & 6.

VERIFIED BY DEREK RICKUS ON 10-8-2014

Title DECK DIMENSIONS		Description LOOKING NORTH	
Bridge No: 350120	Drawn By: DJA	Date: 9/4/08	File Name: S0146030627

Bridge Inspection Field Sketch



Measurements Under Span 5

Rail to Rail	5ft	1 set(s) of tracks	Looking: WEST
Vertical Clearance	31.25ft	Measured from rail	1 at Beam # 1
Distance to Left Bent	29.167ft		
Distance to Left Toe of Slope	74ft		
Distance to Right Bent	29.5ft		
Distance to Right Toe of Slope	33ft		

VERIFIED BY DEREK RICKUS ON 10-8-2014

Title

SPAN #5 OVER PEDESTRIAN WALKWAY

Description

SPAN #5 UNDERCLEARANCE

Bridge No: 350120

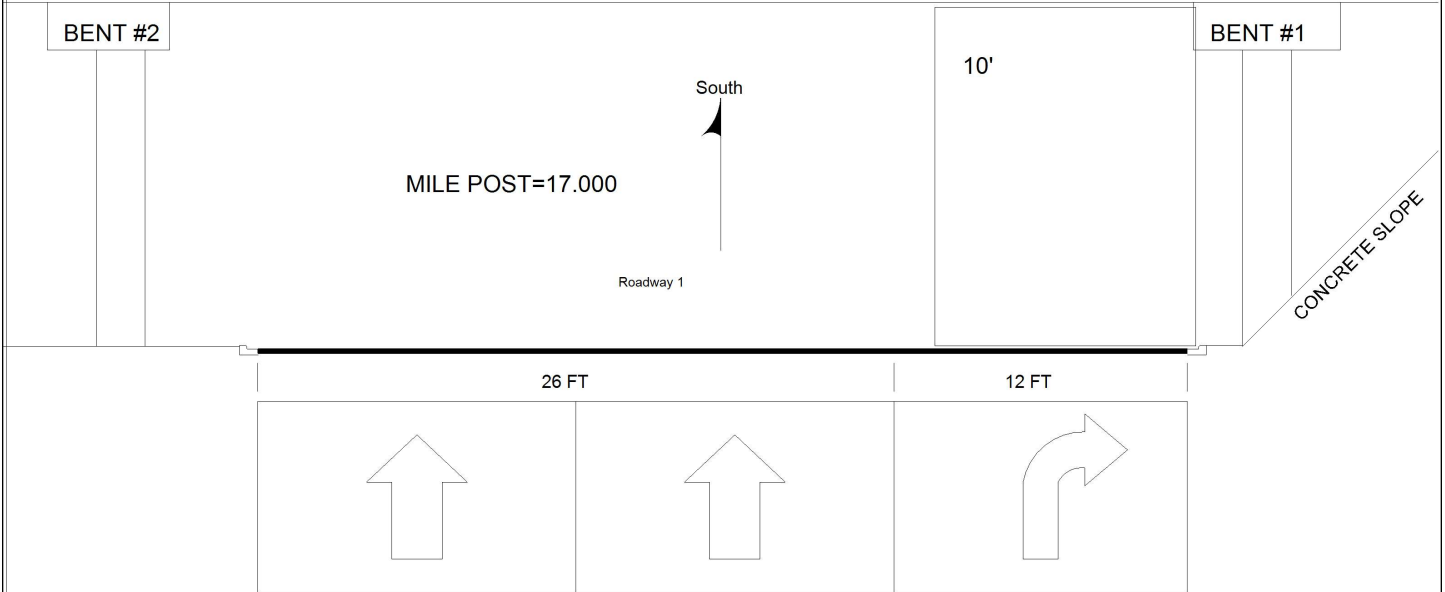
Drawn By: DJA

Date: 9/4/08

File Name: S0146030632

Bridge Inspection Field Sketch

← NORTH 1-85 (NB & SB)



Roadway 1	Distance to Left Guardrail	
	Distance to Right Guardrail	
	Distance to Left Toe of Slope	
	Distance to Left Bent or Columns 6.667 FT	
	Distance to Right Toe of Slope 10 FT	
	Distance to Right Bent or Columns 8.5 FT	
	Maximum Minimum Vertical Clearance 16.333 FT @ 10 Measured From RIGHT EDGE OF ROADWAY on Beam No 1	
	Minimum Vertical Clearance 15.583 FT @ 0 Measured From LEFT EDGE OF ROADWAY on Beam No 1	

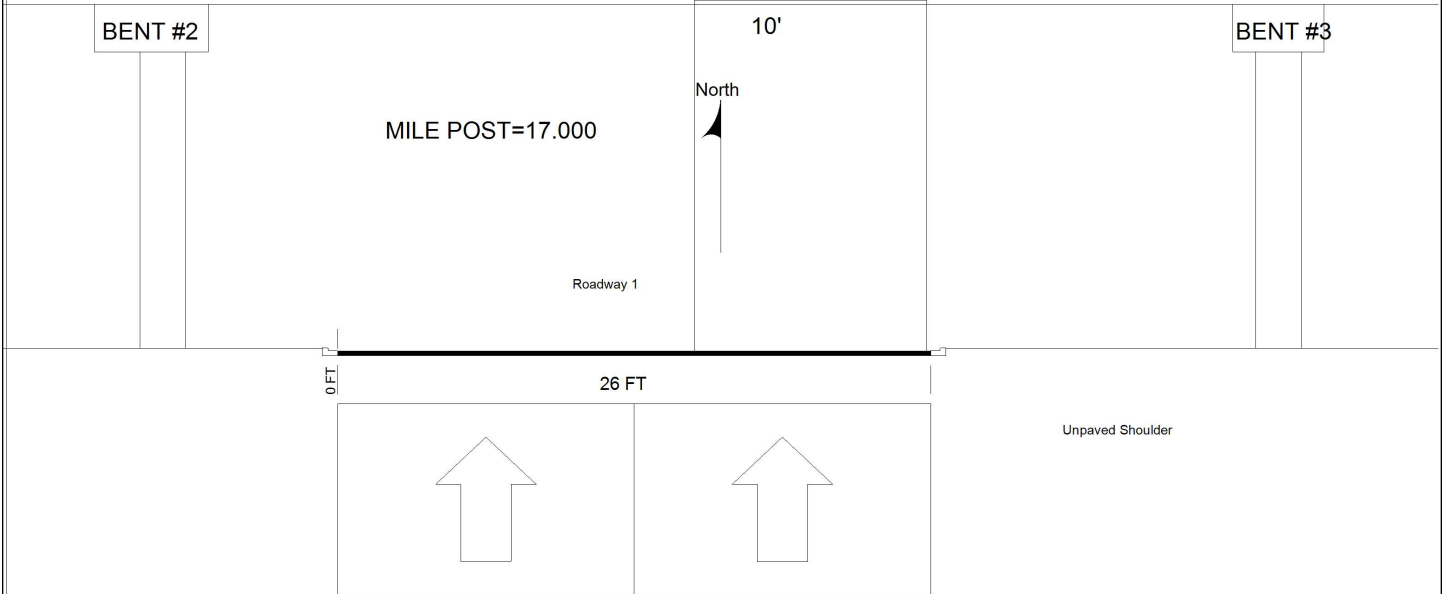
VERIFIED BY DEREK RICKUS ON 10-8-2014

Title SPAN #2 OVER US-321 SB		Description SPAN #2 UNDERCLEARANCE	
Bridge No: 350120	Drawn By: DJA	Date: 9/4/08	File Name: S0146030633

Bridge Inspection Field Sketch

I-85 (NB & SB LANES)

NORTH 

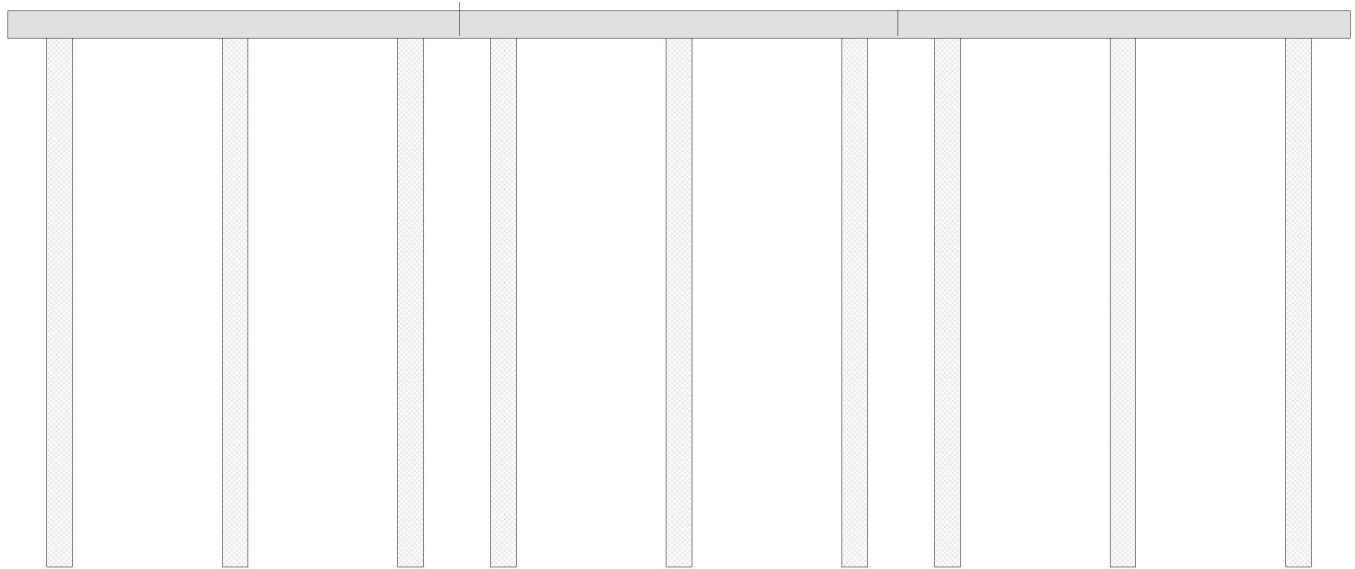


Roadway 1	Distance to Left Guardrail
	Distance to Right Guardrail
	Distance to Left Toe of Slope
	Distance to Left Bent or Columns 6.667 FT
	Distance to Right Toe of Slope
	Distance to Right Bent or Columns 14.25 FT
	Maximum Minimum Vertical Clearance 15.583 FT @ 10 Measured From RIGHT EDGE OF ROADWAY on Beam No 1
	Minimum Vertical Clearance 15.583 FT @ 10 Measured From RIGHT EDGE OF ROADWAY on Beam No 1

VERIFIED BY DEREK RICKUS ON 10-8-2014

Title SPAN #3 OVER US-321 NB		Description SPAN #3 UNDERCLEARANCE	
Bridge No: 350120	Drawn By: DCR	Date: 9/4/08	File Name: S0146030634

Bridge Inspection Field Sketch



Cap Information			Material Cast-in-Place Concrete							
Length	Width	Height	Left Overhang	Right Overhang	Left Beam to End of Cap.	Right Beam to End of Cap.				
130.000 ft.	2.500 ft.	2.667 ft.	5.000 ft.	5.000 ft.	1.833 ft.	1.833 ft.				
Subcap Information			Material							
Length	Width	Height	Left Overhang	Right Overhang	Left Pile to Splice.					
Sill Information			Material							
Length	Width	Height								
Pile #	Material	Spacing	Width/Dia.	Height	Length	Orientation	Driven?	Replacement?	Removed?	Collar?
1	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
2	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
3	Concrete	9.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
4	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
5	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
6	Concrete	9.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
7	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
8	Concrete	17.0 ft.	2.5 ft.	2.5 ft.		Vertical	No	No	No	No
9	Concrete		2.5 ft.	2.5 ft.		Vertical	No	No	No	No
VERIFIED BY DEREK RICKUS ON 10-8-2014										
Bent/Abutment #: 1			Similar Bents: 2 THRU 5							

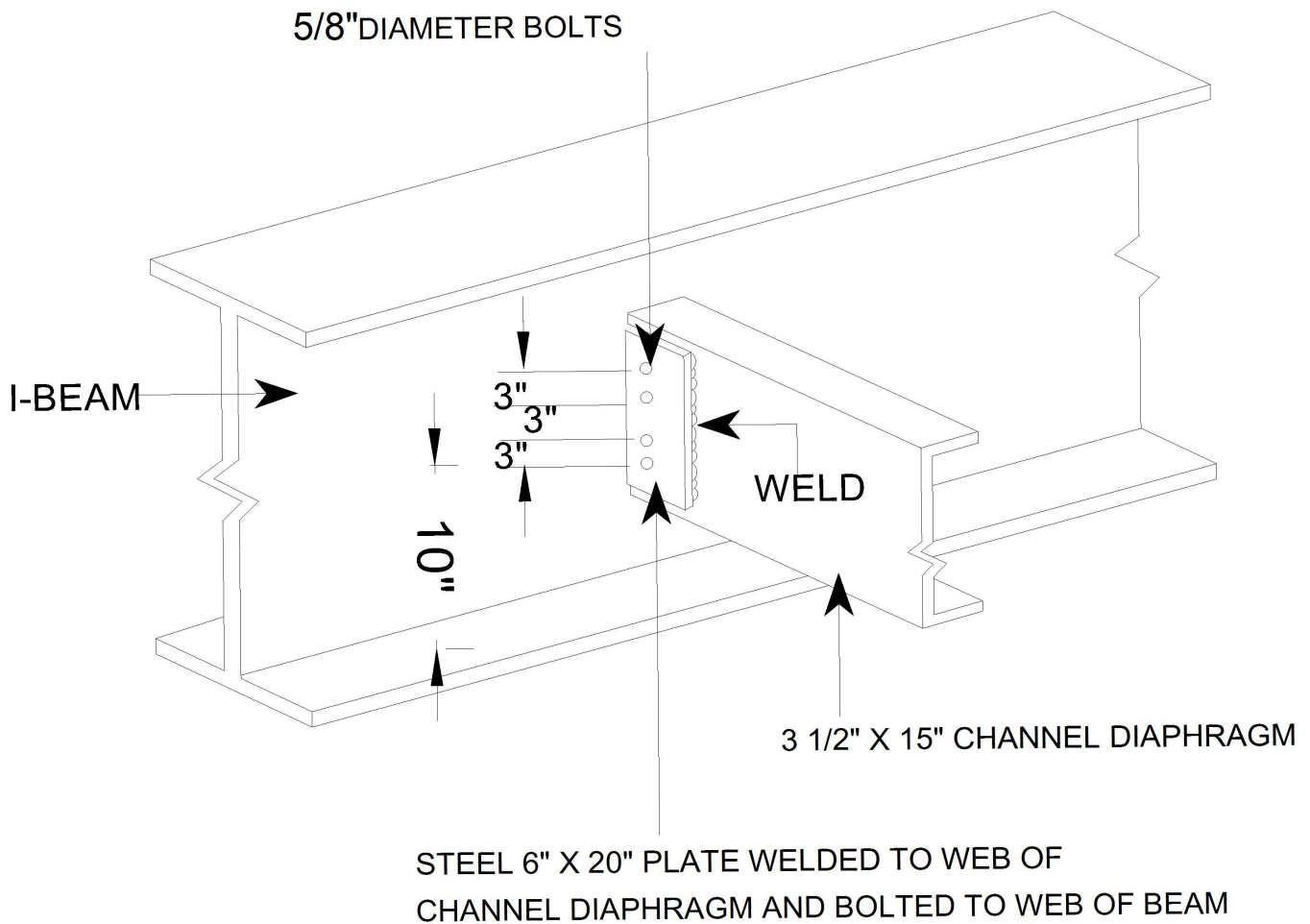
Title				Description				
SUBSTRUCTURE				DETAILS				
Bridge No: 350120		Drawn By: DEREK RICKUS			Date: 9/6/2012		File Name: S0142001884	

Bridge Inspection Field Sketch

VERIFIED BY DEREK RICKUS ON 10-8-2014

DIAPHRAGM DETAILS

AT THIRD POINTS



Title
DIAPH.

Description
DETAILS

Bridge No: 350120

Drawn By: DEREK RICKUS

Date: 9/6/2012

File Name: S0142001885