CONCRETE WEARING COURSE

☐ LOW SLUMP

☐ OTHER _____
TYPE OR MANUFACTURER

EXPANSION JOINTS

JOINT MANUFACTURER

MANUFACTURER'S IDENTIFICATION _____
MFR'S No. AND/OR LETTER DESIGNATION FOR JOINT USED

GLAND MANUFACTURER _____
NAME AND ADDRESS (CITY, STATE)

SIZE OF GLAND _____

MANUFACTURER'S IDENTIFICATION _____
MFR'S No. AND/OR LETTER DESIGNATION FOR GLAND USED

ELASTOMERIC BEARING PADS

PAD MANUFACTURER _____
NAME AND ADDRESS (CITY, STATE)

SPECIAL SURFACE FINISH

SYSTEM: _____ COLOR: _____

FINISHING ROADWAY FACES OF BARRIER RAILING

TYPE: _____ COLOR: _____

ANTI-GRAFFITI COATING

MANUFACTURER _____
NAME AND ADDRESS (CITY, STATE)

PRODUCT NAME: _____ LOCATION: _____

PAINT SYSTEM

Mn/DOT SPECIFICATION NUMBER _____
2478 OR 2479 OR OTHER

MANUFACTURER _____
NAME AND ADDRESS (CITY, STATE)

PRIME COAT _____
Mn/DOT MATERIAL SPECIFICATION NUMBER

INTERMEDIATE COAT _____
Mn/DOT MATERIAL SPECIFICATION NUMBER

FINISH COAT _____ _____
Mn/DOT MATERIAL SPECIFICATION NUMBER COLOR

PLAN QUALITY

RATE 1 (AGREE), 2 (NEUTRAL), OR 3 (DISAGREE, PLEASE COMMENT BELOW)

DIMENSIONING AND DETAILING ADEQUATELY DESCRIBED REQUIRED CONSTRUCTION. _____

BAR LISTS AND QUANTITIES WERE TYPICALLY COMPLETE AND FREE OF ERRORS. _____

SCALE OF DRAWINGS AND OVERALL LEGIBILITY OF LINES AND TEXT WAS GOOD. _____

(SB) SPECIAL PROVISIONS ADEQUATELY DESCRIBED SPECIAL WORK AND PAYMENT. _____

COMMENTS: _____

NUMBER OF BRIDGE SUPPLEMENTAL AGREEMENTS: _____ COST: $ _____

LIST SIGNIFICANT ERRORS OR OMISSIONS IN PLAN DETAILS OR PAY QUANTITIES IN THE SPACE PROVIDED AT RIGHT.

BRIDGE REMOVAL / BRIDGE OPENING

NUMBER OF AND DATE OLD BRIDGE WAS REMOVED (IF APPLICABLE):

BRIDGE NUMBER _____ DATE REMOVED _____

DATE NEW BRIDGE WAS OPENED TO TRAFFIC _____

NOTIFY THE BRIDGE OFFICE BRIDGE MANAGEMENT UNIT WITH THIS INFORMATION AS SOON AS POSSIBLE. (651) 366-4557

OTHER ITEMS ①

① UTILITIES ADDED DURING CONSTRUCTION AND SPECIALTY ITEMS.

FINAL QUANTITIES ENTERED ON SCHEDULE OF QUANTITIES: YES ☐ NO ☐

SUMMARY OF SIGNIFICANT AS-BUILT CHANGES

THE AS-BUILT INFORMATION WAS ADDED TO THE PLAN BY:

_____ _____
INSPECTOR(S) SIGNATURE DATE

CHECKED BY: _____ _____
PROJECT ENGINEER/SUPERVISOR SIGNATURE DATE

AT THE TIME OF THE FINAL, THIS COMPLETED AS-BUILT BRIDGE DATA SHEET MUST BE SUBMITTED TO THE BRIDGE OFFICE - ATTN: REGIONAL CONSTRUCTION ENGINEER (MS610).

REVISION: 10-28-2008

APPROVED: SEPTEMBER 26, 2003
STATE BRIDGE ENGINEER

AS-BUILT DETAILS
(AS NEEDED)

FIG. 5-397.900

TITLE: AS-BUILT BRIDGE DATA

DES: ------ DR: ------ APPROVED:
CHK: ------ CHK: ------

SHEET NO. __ OF __ SHEETS

BRIDGE NO. -----