|  |
| --- |
|  **BRIDGE SCOUR PLAN OF ACTION** |
| STRUCTURE NO.: |  | DATE: |  |

|  |  |
| --- | --- |
| **ROUTE SERVICE LEVEL:** | **ROAD SURFACE:** |
| [ ]  | EMERGENCY | [ ]  | SCHOOL BUS | [ ]  | MAJOR | [ ]  | MINOR | [ ]  | PAVED | [ ]  | AGGREGATE | [ ]  | DIRT |

**ACTION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **OPTION:** | [ ]  | CLOSE ROAD | [ ]  | REMAIN OPEN WITH RESTRICTIONS | [ ]  | REMAIN OPEN WITHOUT RESTRICTIONS |
| **RESTRICTIONS:** | [ ]  | LANE LIMITS | [ ]  | LOAD LIMITS | [ ]  | WARNING SIGNS | [ ]  | OTHER:  |       |
| **REPLACE STRUCTURE:** | [ ]  | YES | [ ]  | NO | PROPOSED STRUCTURE: |       | PROGRAM YEAR: |      |
| DETAILS:       |
| **MONITORING** | [ ]  | YES | [ ]  | NO |
| **AREA OF CONCERN:**  |       |
| **REQUIRED POA LOG DOCUMENTATION:** |  |
| AS THE CRITERIA BELOW IS SATISFIED, IF NO CHANGE WITHIN A 12 MONTH PERIOD, THEN DOCUMENT “NO CHANGE” |
| **SUPPLEMENTAL HYDRAULIC INSPECTION FREQUENCY:** | INSPECTOR: |
| [x]  | 12 MO. | [ ]  | 6 MO. | [ ]  | OTHER |  | [ ]  | PRE-STORM | [ ]  | DURING STORM | [ ]  | POST-STORM |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **PRE-STORM FORECAST:** |
| [ ]  | FLOOD WARNING | [ ]  | INTENSITY: |      | in/hr | [ ]  | STORM TOTAL: |      | in |  |
| [ ]  | PRE-STORM CLOSURE - CRITERIA:  |       |  |
| [ ]  | OTHER: |       |
|  |  |  |
| **POST FLOOD EVENT:** |
| [ ]  | ROAD OVERFLOW | [ ]  | INTENSITY: |      | in/hr | [ ]  | STORM TOTAL: |      | in |  |
| [ ]  | OTHER: |       |  |
|  |  |  |
| **CLOSURE CRITERIA:** |
| FLOOD: | [ ]  | MINOR | [ ]  | MODERATE | [ ]  | MAJOR | [ ]  | STAGE: |       | ft |
| [ ]  | WATER ABOVE LOW STRUCTURE | [ ]  | ROAD OVERFLOW | [ ]  | MAJOR BERM SCOUR | [ ]  | APPROACH/BRIDGE FAILING |
| [ ]  | OTHER: |       |  |
|  |  |  |

**CLOSURE PLAN**

|  |  |
| --- | --- |
| CLOSURE DETAIL:(*FULL OR LIMITED CLOSURE*) |       |
| DETOUR ROUTE: |       |
| **CLOSURE NOTIFICATION:** |
| MAINTENANCE: |       |  | PHONE: |       |  |
| PUBLIC SAFETY: |       |  | PHONE: |       |  |
| MEDIA 1: |       |  | PHONE: |       |  |
| MEDIA 2: |       | PHONE: |       |

**REOPENING BRIDGE**

|  |  |  |
| --- | --- | --- |
| CRITERIA: |       |  |
| SAFETY INSPECTION AND/OR REPAIRS COMPLETED | [ ]  | OTHER: |       | AUTHORIZED BY: |       |  |
|  |  |  |  |  |  |  |  |
| **MAINTENANCE** | [ ]  | YES | [ ]  | NO |  |
| PROPOSED: |       |
| SCHEDULE: |       |  |

|  |  |  |
| --- | --- | --- |
| WRITTEN BY:       | QC BY:       | QA BY:       |
| DATE: |       | DATE: |       |  DATE: |       |

*THIS POA TO BE REEVALUATED AND REVISED AS NECESSARY FOLLOWING ANY SIGNIFICANT CHANGE IN SCOUR CONDITIONS.*