



COUNTY-CITY BRIDGE IMPROVEMENT PROGRAM (CCBIP) APPLICATION

SECTION 1: REQUESTING AGENCY INFORMATION

AGENCY NAME <i>(County, City, District)</i>		PROJECT MANAGER	
MAILING ADDRESS		PHONE	
EMAIL ADDRESS		DATE SUBMITTED	

SECTION 2: LOCATION

ROAD NAME	ROAD NO.	BRIDGE NO.	HIGHWAY DISTRICT #
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SECTION 3: WORK TYPE

Repairs Replacement

SECTION 4: PROJECT ESTIMATE

Estimated Cost	
Public Pledge	
TOTAL REQUEST	

SECTION 5: BRIDGE DATA *(Use most recent report.)*

POSTING STATUS	CONDITION RATING	DIMENSIONS & TYPE	
<input type="checkbox"/> Closed <input type="checkbox"/> Posted <input type="checkbox"/> Not Posted	Deck:	Deck Area:	Structure Length:
Weight:	Super Structure:	Structure Type: <input type="checkbox"/> Slab <input type="checkbox"/> Girder <input type="checkbox"/> Truss	
	Sub Structure:	<input type="checkbox"/> Tee Beam <input type="checkbox"/> Box Beam <input type="checkbox"/> Channel Beam <input type="checkbox"/> Girder/Floor Beam <input type="checkbox"/> Frame <input type="checkbox"/> Culvert <input type="checkbox"/> Pipe Ford <input type="checkbox"/> Other:	
TRAFFIC DATA			
ADT:	Detour Length:		

SECTION 6: PROPOSED WORK

Provide a detailed description of the proposed work or type of replacement with projected goals supported by attached sketches and applicable KYTC drawings and specification standards. Text limited for accurate printing. Use continuation sheet, if necessary.

SECTION 7: SUPPORTING DOCUMENTS

Drawing, Sketch, Standard Drawing, etc. (attached)
 Photos of Issue – 6 maximum (attached)
 Inspection Report (attached)

SECTION 8: REQUIRED DOCUMENTS

District Recommendation (attached)
 Bridge Management Education Certificate (attached)
 Detailed Estimate (attached)

SECTION 9: COUNTY JUDGE OR CITY MAYOR SIGNATURE

PRINTED NAME	SIGNATURE	DATE SIGNED