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| Bridge Engineering Assistance ProgramProject Tracking Form | | | | | | | | | | | | | | | | | | |
| Contact Personnel | | | | | | | | | | | | | | | | | | |
| **District Office:** | |  | | | | | | | | | | | | | | | | |
| **Bridge Division:** | | Jamey Laughlin (573) 526-5167 James.Laughlin@modot.mo.gov | | | | | | | | | | | | | | | | |
| **Consultant:** | |  | | | | | | | **Email:** | | | | Click here to enter text. | | | | | |
| **Project Manager:** | | Click here to enter text. | | | | | | | **Phone:** | | | | Click here to enter text. | | | | | |
| **Local Agency:** | | Click here to enter text. | | | | | | | **Email:** | | | | Click here to enter text. | | | | | |
| **Contact Person:** | | Click here to enter text. | | | | | | | **Phone:** | | | | Click here to enter text. | | | | | |
| Project Information | | | | | | | | | | | | | | | | | | |
| **Project Number:**  (Assigned by Bridge) | | | Xxxxxx-xx | | | **District:** | |  | **County:** | | |  | | | **Completion Date:** (Not to Exceed 90 Days) | | | Enter Date. |
| **Bridge Number(s):** | | | Click here to enter text. | | | | | | | | | | | **Non-NBI Length** (Submit Photos with T.F.) | | | | |
| **Was a Previous BEAP STUDY Done?** | | | | | | | No | | | **Were the Recommendations Implemented?** | | | | | | | NA | |
| **Fully Describe the Problems that the BEAP Study is Intended to Address.** | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | |
| **Fully Describe the Scope of Services being Provided by this BEAP Study to Address the Problems.** | | | | | | | | | | | | | | | | | | |
| Click here to enter text.    **Provide Load Rating Summary in Accordance with Exhibit II of Contract** | | | | | | | | | | | | | | | | | | |
| Costs | (The invoiced cost shall not exceed the estimated cost.) | | | | | | | | | | | | | | | | | |
| **Estimated Cost for Services: $** | | | | | Click here to enter text. | | | | | | **Invoiced Cost for Services: $** | | | | | Click here to enter text. | | |
| Milestone Dates | | | | | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | Consultant Emails Project Request to District Contact Person. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | District Contact Reviews Project Request and Emails it to Bridge Division. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | Scope of Services and Engineering Fees Reviewed and Accepted by Bridge Division. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | District gives Consultant Notice to Proceed on BEAP Study. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | BEAP Report Reviewed and Accepted by Bridge Division. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | District Notifies Consultant and Local Public Agency that BEAP Report was Accepted. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | Consultant Invoice Reviewed and Approved for Payment by Bridge Division. | | | | | | | | | | | | | | |
| Click here to enter a date. | | | | Approximate Date Electronic Payment to Consultant. | | | | | | | | | | | | | | |
| **General Comments:** | | | | | | | | | | | | | | | | | | |
| Click here to enter text. | | | | | | | | | | | | | | | | | | |