



APPLICATION FOR BRIDGE FUNDS

State of Minnesota - Department of Transportation
State Aid for Local Transportation

Identification	Project Number _____	Old Bridge Number _____	
	New Bridge No. _____	Over _____	
	County of _____	Road or Street No. _____	
	Township of _____	Road or Street Name _____	
	Municipality of _____	Proposed Const Year _____	
	Does the municipality have a population of 5,000 or less? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Eligibility	Bridge Sufficiency Rating _____ Is this bridge hydraulically deficient? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Adequacy Status from Structure Inventory <input type="checkbox"/> Structurally Deficient <input type="checkbox"/> Functionally Obsolete <input type="checkbox"/> Adequate		
	Date of Council/Board action prioritizing this bridge _____		
	Is this a road-in-lieu of bridge project? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Prioritization	How many people are affected by this deficiency? _____ What is the ADT on this bridge? _____		
	Describe the economic importance of replacing this bridge.		
	Is the road designated or planned to be designated as a Minimum Maintenance road? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	(Attach additional sheets for explanation if necessary)		
	Is the township net tax capacity less than \$300,000? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Cost Estimate	Is the bridge listed on the National Register of Historic Places or been determined to be eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	National Register of Historic Places link here: http://www.nps.gov/history/nr/research/		
		Eligible Amount	Ineligible Amount
	Structure Costs	\$ _____	\$ _____
	Approach Costs	\$ _____	\$ _____
	Engineering Costs	\$ _____	\$ _____
	Total Costs	\$ _____	\$ _____
	Total Project Cost	\$ _____	\$ _____
	County/City Engineer _____		Date _____
	DSAE	DISTRICT STATE AID ENGINEER RECOMMENDATION	
Replace _____		Defer _____	
Approval	District State Aid Engineer Signature _____ Date _____		
	STATE AID USE ONLY	Federal-Aid \$ _____	
		State-Aid \$ _____	
		Local/Other \$ _____	
		Town Bridge \$ _____	
		Unallocated Town Bridge \$ _____	
		State Bridge Funds \$ _____	
	Total \$ _____		