



MOVABLE BRIDGE INSPECTION CHECKLIST

Email checklist and bridge specific inspection procedures to MDOT-BridgeInspection@michigan.gov

Str. No. <input style="width: 95%;" type="text"/>	Bridge Owner <input style="width: 95%;" type="text"/>	MDOT Structure ID <input style="width: 95%;" type="text"/>
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Facility <input style="width: 95%;" type="text"/>	Feature <input style="width: 95%;" type="text"/>	Material/Design <input style="width: 95%;" type="text"/>
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Routine Inspector Qualifications

Routine and Complex Inspection Procedures

Detailed Inspections

	YES	NO	N/A
Routine inspection team leader meets requirements of NBIS section 650.309? <i>(All NBI inspections are required by the federal government to be conducted by a team leader.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any additional certifications or training required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Registration as a Professional Engineer in the State of Michigan? <i>(Professional licensure is strongly recommended for inspection of complex structures.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NHI 1300078 Fracture Critical Inspection Techniques for Steel Bridges? <i>(The majority of complex structures contain fracture critical elements.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other additional training requirements? <i>(May include courses provided by National Highway Institute or other recognized programs.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional bridge construction, maintenance, or design experience required? <i>(Specify number of years in each or all disciplines.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inspection procedures reference the Michigan Structure Inspection Manual? <i>(Reference applicable chapters for routine, detailed and fracture critical inspections.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special inspection equipment requirements described?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Under-bridge unit (reachall) required for fracture critical? <i>(If answer is no, please explain how hands-on inspection is performed.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comment: <input style="width: 95%;" type="text"/>			
Additional specialized equipment or testing required? <i>(Periodic ultrasonic, magnetic particle, acoustic emission, etc.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Complex inspection features describe elements, location(s), and frequency?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fracture critical elements? <i>(Highlighted drawing of fracture critical members should be included or location referenced.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical and electrical system equipment described? <i>(A brief synopsis regarding equipment is required.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Additional complex features? <i>(List any additional uncommon bridge elements that are vital for operation, capacity, or safety.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regularly scheduled detailed inspections? <i>(AASHTO recommends detailed inspections to be performed during every third inspection cycle.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Detailed inspections performed as-needed based according to condition? <i>(Inspections performed to complete repairs during equipment malfunction or due to poor condition.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact information for structural, mechanical, electrical repairs provided? <i>(Include contact information for contractors or in-house personnel who generally perform repairs.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventive and routine maintenance performed by in-house personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is the maintenance performed adequately described? <i>(What, when, and how often is greasing, washing, etc. completed.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contact information provided for emergencies and critical finding notifications? <i>(Who is responsible for responding to critical issues and coordinating repairs.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To Be Completed Following Each Routine or Fracture Critical Inspection

I certify that the bridge file, plans, previous reports, and bridge specific inspection procedures were reviewed prior to performing the current field inspection:

Team Leader Name <input style="width: 95%;" type="text"/>	Agency/Company Name <input style="width: 95%;" type="text"/>	Bridge Specific Procedures Last Modified Date: <input style="width: 95%;" type="text"/>
Team Leader Signature <input style="width: 95%;" type="text"/>	Inspection Date <input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>