

# AS-BUILT REPAIR QUANTITY TABLE

END BENT 1	QUANTITIES			
	ESTIMATE		ACTUAL	
SHOTCRETE REPAIRS	AREA SQ. FT.	VOLUME CU. FT.	AREA SQ. FT.	VOLUME CU. FT.
CAP	16.0	8.0		
CURTAIN WALL	0.0	0.0		
CONCRETE REPAIRS	AREA SQ. FT.	VOLUME CU. FT.	AREA SQ. FT.	VOLUME CU. FT.
CAP	3.4	1.7		
EPOXY RESIN INJECTION		LIN. FT.		LIN. FT.
CURTAIN WALL		0.0		
EPOXY COATING		SQ. FT.		SQ. FT.
TOP OF BENT CAP		86		

VALUES IN CHART REPRESENT ESTIMATED REPAIR TOTALS AFTER REMOVAL OF UNSOUND CONCRETE, MINIMUM OF 1" BEHIND REBAR AND MINIMUM 2" CLEARANCE TO SAWCUT. SEE "TYPICAL CAP AND COLUMN REPAIR DETAILS" SHEET.

## NOTES

REPAIR LOCATIONS AND ESTIMATE OF QUANTITIES ARE GIVEN BASED ON THE BEST INFORMATION AVAILABLE. IF ADDITIONAL REPAIRS NOT SHOWN ON THE DRAWINGS ARE DEEMED NECESSARY BY THE ENGINEER, THE ENGINEER WILL NOTE ON THE DRAWINGS THE APPROXIMATE LOCATION AND DESCRIPTION OF THE REPAIRS AND ENTER THE ACTUAL QUANTITIES INTO THE AS-BUILT REPAIR QUANTITY TABLE.

CONCRETE REPAIRS MAY BE SUBSTITUTED IN LIEU OF SHOTCRETE REPAIRS WITH THE APPROVAL OF THE ENGINEER.




FOR SHOTCRETE REPAIR, SEE SPECIAL PROVISION.

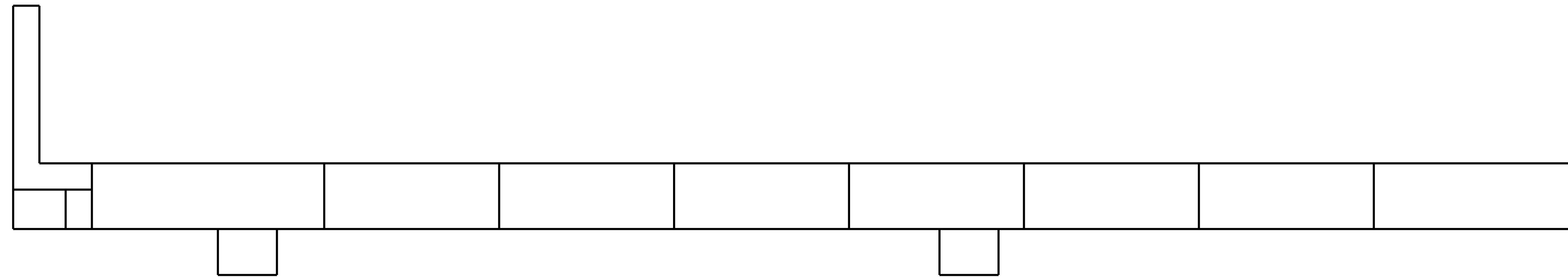
FOR CONCRETE REPAIR, SEE SPECIAL PROVISION.

FOR EPOXY RESIN INJECTION, SEE SPECIAL PROVISION.

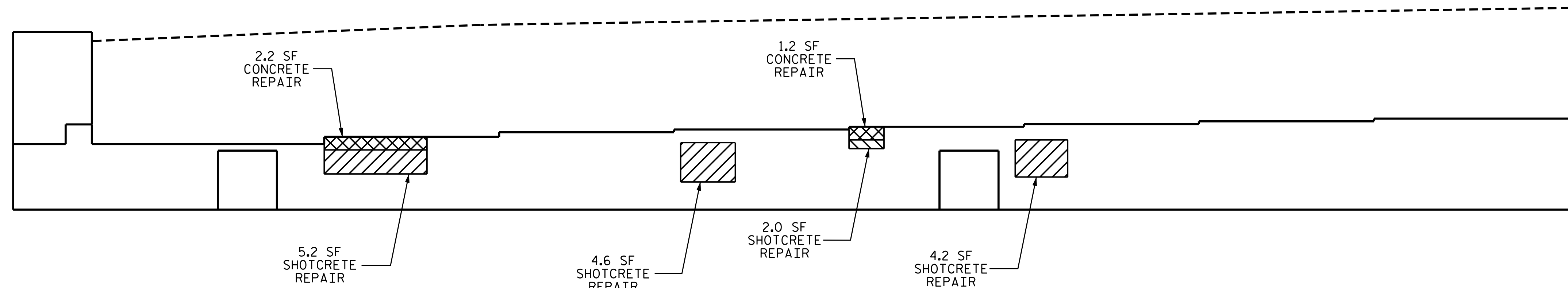
CLEAN AND REMOVE DEBRIS FROM THE TOP OF THE CAP AND APPLY EPOXY PROTECTIVE COATING TO THE TOP SURFACE OF THE CAP. THE CONTRACTOR SHALL NOT COAT THE AREA OF THE CAP BENEATH THE MASONRY PLATES. FOR EPOXY COATING, SEE SPECIAL PROVISIONS.

AFTER SATISFACTORY COMPLETION OF SHOTCRETE, CONCRETE AND ERI REPAIRS, REPAIR EXISTING MURAL PAINT ON BENTS AND GIRDERS AS APPROPRIATE.

-  CONCRETE REPAIR AREA
-  SHOTCRETE REPAIR AREA
-  EPOXY RESIN INJECTION (ERI)



PLAN



ELEVATION

PROJ. NO. I-5746C  
MECKLENBURG COUNTY  
 BRIDGE NO. 590322

SHEET 1 OF 2

DocuSigned by:  
  
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8/23/2021

STATE OF NORTH CAROLINA  
 DEPARTMENT OF TRANSPORTATION  
 RALEIGH

END BENT 1  
 SOUTHBOUND

DRAWN BY : R.L. PUTEK DATE : 05/2021  
 CHECKED BY : H.A. LOCKLEAR DATE : 05/2021

DOCUMENT NOT CONSIDERED  
 FINAL UNLESS ALL  
 SIGNATURES COMPLETED

REVISIONS						SHEET NO.
NO.	BY:	DATE:	NO.	BY:	DATE:	TOTAL SHEETS
1			3			55-8
2			4			274