

aacole

		SPAN C
		SPAN B

SPAN B SPAN C — 1.5 LF ERI -4.7 SF SHOTCRETE REPAIR 2.0 SF -SHOTCRETE REPAIR \_ \_ \_ . \_ \_ \_ \_ \_ \_ \_ \_ \_

<u>end view</u>

AS-BUILT REPAIR QUANTITY TABLE								
BENT 2 NORTHBOUND	QUANTITIES							
DENT Z NORTHBOUND	ESTIMATE		ACTUAL					
SHOTCRETE REPAIRS	AREA SQ.FT.	VOLUME CU.FT.	AREA SQ.FT.	VOLUME CU.FT.				
САР	4.7	2.4						
COLUMNS	2.0	1.0						
CONCRETE REPAIRS	AREA SQ.FT.	VOLUME CU.FT.	AREA SQ.FT.	VOLUME CU.FT.				
CAP	0.0	0.0						
EPOXY RESIN INJEC	LIN. FT.		LIN. FT.					
CAP	1.5							
COLUMNS	0.0							
EPOXY COATIN	SO. FT.		SQ. FT.					
TOP OF BENT CAP	135							

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

## NOTES

REPAIR LOCATIONS AND ESTIMATE OF QUANTITIES ARE 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 CAP REPAIRS, SEE "TYPICAL CAP AND COLUMN REPAIR DETAILS" SHEET.

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. EPOXY COATING SHALL BE APPLIED 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.

CONCRETE REPAIR AREA

SHOTCRETE REPAIR AREA

----- EPOXY RESIN INJECTION (ERI)

	ME	CT NO. CKLEN NO.:_	BURC	) CO		
DocuSigned by:	SHEET 1 O	- 2				
O2EE938FAB674C5	STATE OF NORTH CAROLINA DEPARTMENT OF TRANSPORTATION RALEIGH					
OF ESSION A CONTINUE	BENT 2 NORTHBOUND SPAN B FACE					
8/23/2021						
	REVISIONS SHEET NO.					
CUMENT NOT CONSIDERED	NO. BY:	DATE: NO		DATE:	S8-15	
FINAL UNLESS ALL	1	8			TOTAL SHEETS	
SIGNATURES COMPLETED	2	A	<u>ا</u> ا		274	