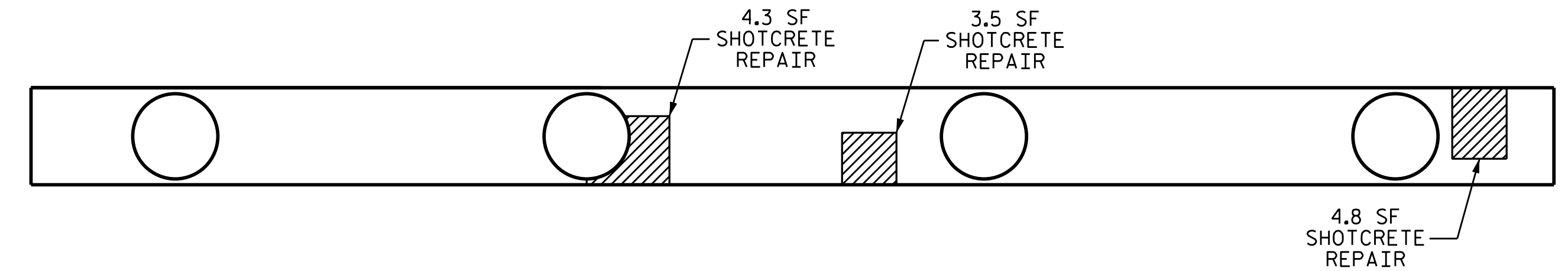


SPAN C  
SPAN B

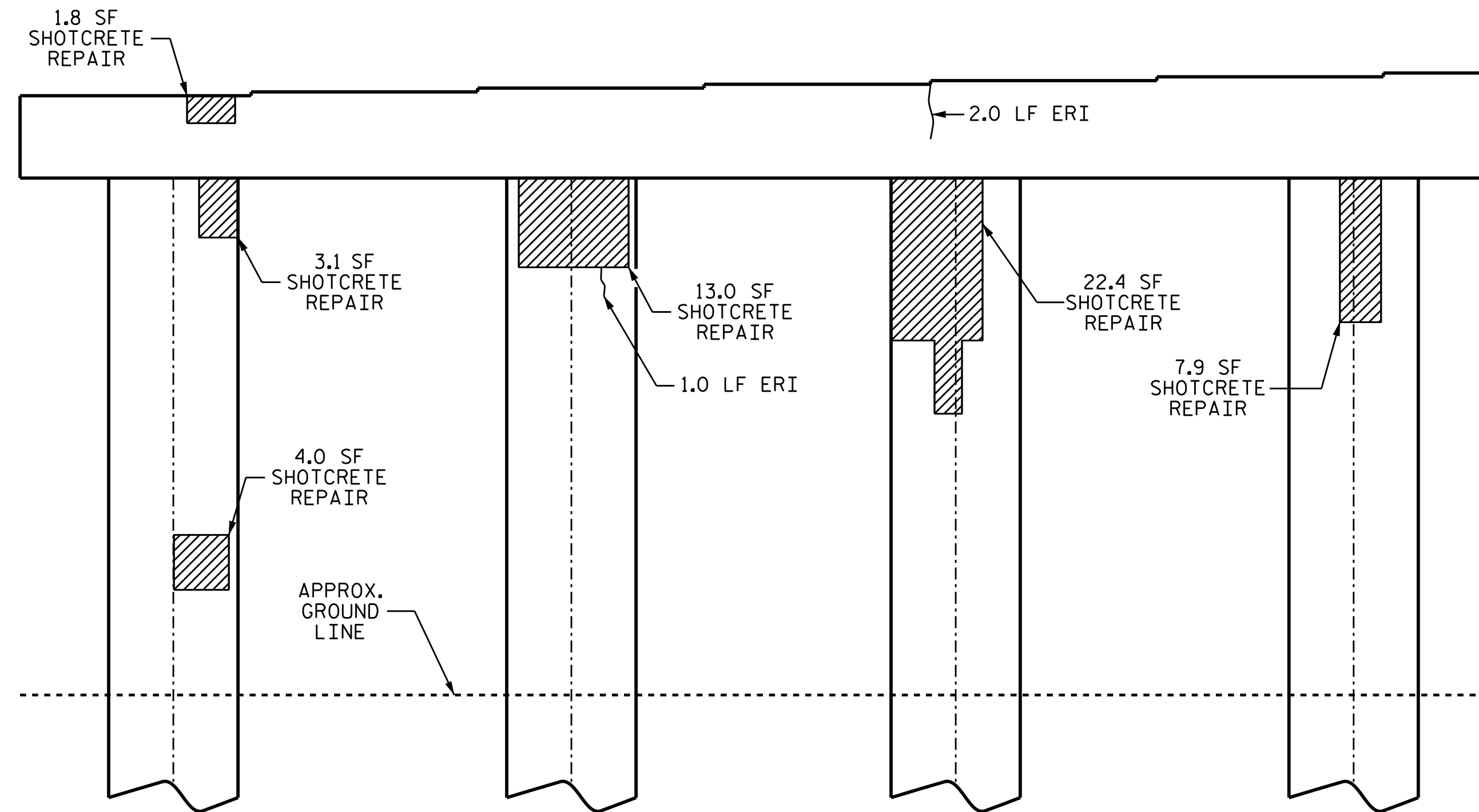


PLAN - TOP OF CAP

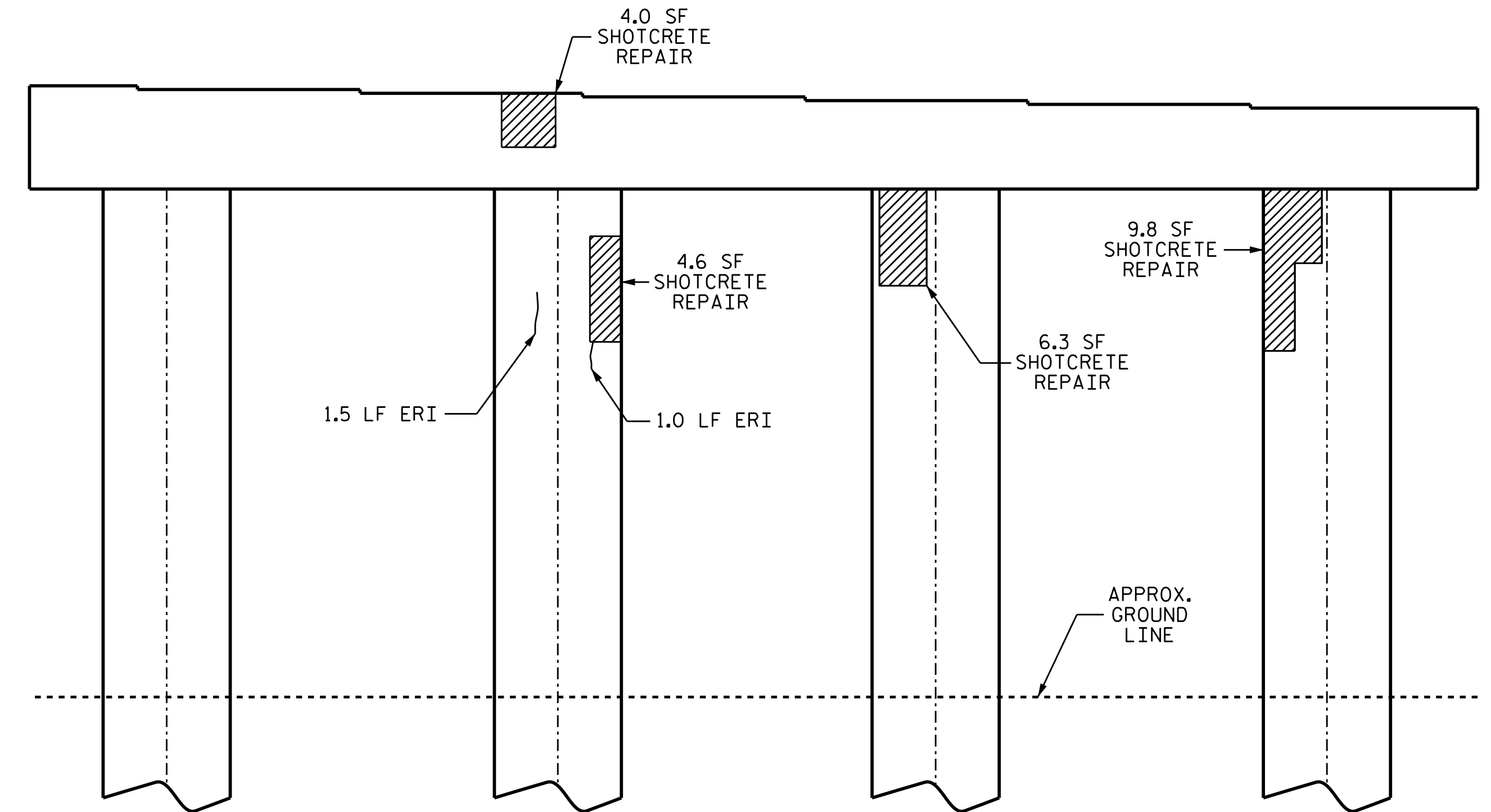
SPAN B  
SPAN C



PLAN - BOTTOM OF CAP



SPAN B VIEW - ELEVATION



SPAN C VIEW - ELEVATION

**NOTES:**

REPAIR LOCATIONS AND ESTIMATE OF QUANTITIES ARE GIVEN WITH 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 ADJUST THE ACTUAL QUANTITIES ENTERED INTO THE REPAIR QUANTITY TABLE.

FOR REPAIR DETAILS, SEE "TYPICAL CAP AND COLUMN REPAIR DETAILS" SHEET.

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

FOR SHOTCRETE REPAIRS, SEE SPECIAL PROVISIONS.

FOR CONCRETE REPAIRS, SEE SPECIAL PROVISIONS.

FOR EPOXY RESIN INJECTION, SEE SPECIAL PROVISIONS.

CLEAN AND REMOVE DEBRIS FROM THE TOP OF THE CAP AND APPLY EPOXY PROTECTIVE COATING. 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.

**AS-BUILT REPAIR QUANTITY TABLE**

BENT 2 REPAIRS	QUANTITIES			
	ESTIMATE		ACTUAL	
SHOTCRETE REPAIRS	AREA SF	VOLUME CF	AREA SF	VOLUME CF
CAP	18.4	9.2		
COLUMN	71.1	35.6		
CONCRETE REPAIRS	AREA SF	VOLUME CF	AREA SF	VOLUME CF
CAP	0.0	0.0		
EPOXY RESIN INJECTION		LN. FT.		LN. FT.
CAP		2.0		
COLUMN		3.5		
EPOXY COATING		SO. FT.		SO. FT.
TOP OF BENT CAP		187		

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

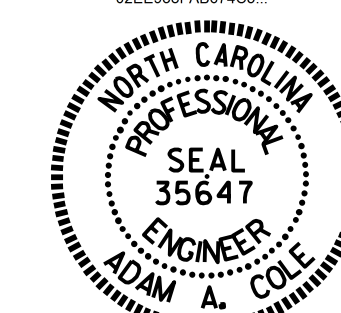
SHOTCRETE AREA

CONCRETE AREA

ERI - EPOXY RESIN INJECTION

PROJECT NO. 15BPR.51  
GASTON COUNTY  
 BRIDGE NO. 350046

DocuSigned by:



01/25/2022

STATE OF NORTH CAROLINA  
 DEPARTMENT OF TRANSPORTATION  
 RALEIGH

BENT 2

DRAWN BY : A. SORSENGINH DATE : 5/2019  
 CHECKED BY : H.A. LOCKLEAR DATE : 12/2021

DOCUMENT NOT CONSIDERED  
 FINAL UNLESS ALL  
 SIGNATURES COMPLETED

REVISIONS						SHEET NO.
NO.	BY:	DATE:	NO.	BY:	DATE:	S1-18
1			3			TOTAL SHEETS
2			4			67