

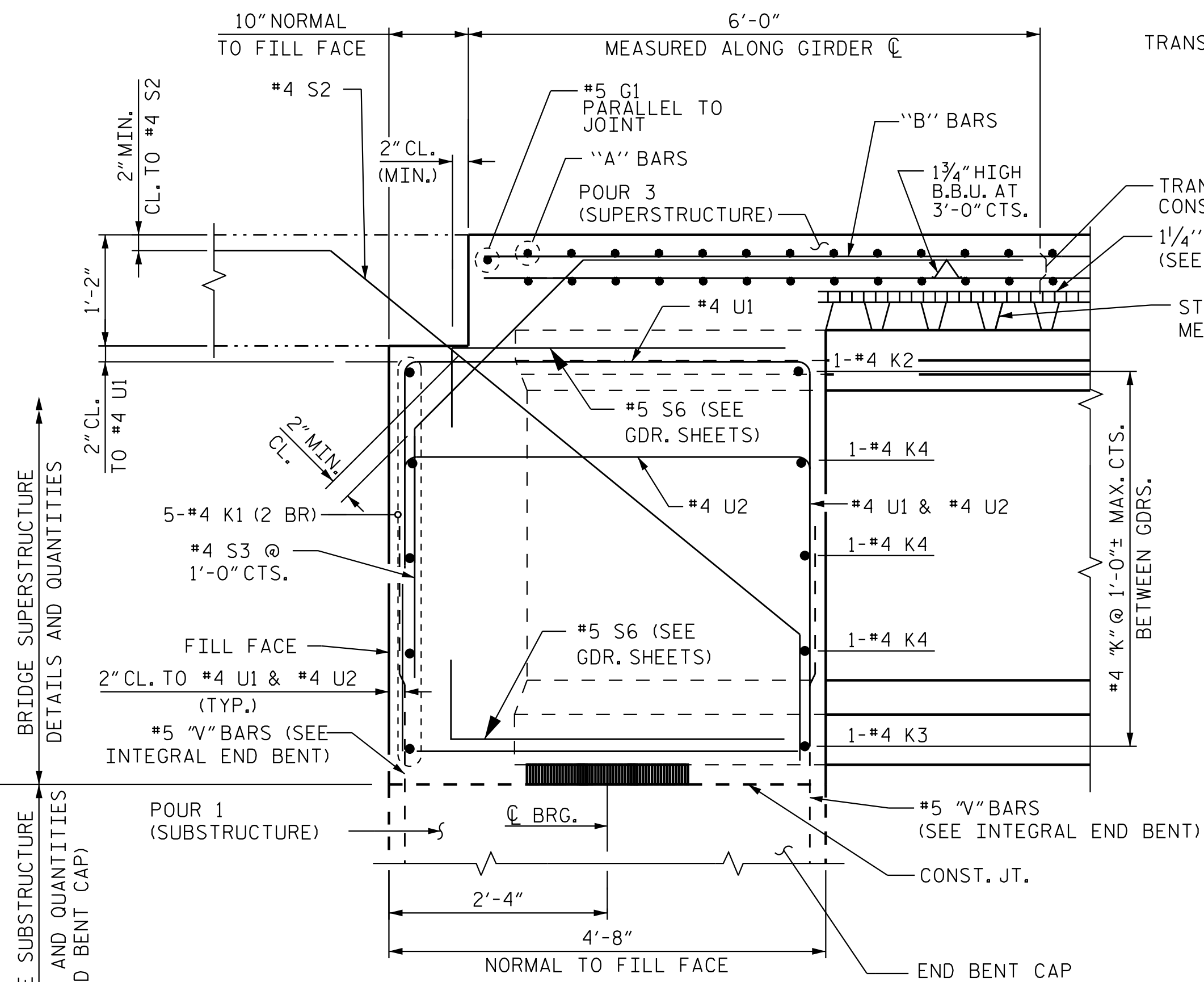
NOTES:
 PROVIDE 1/4" HIGH BEAM BOLSTERS UPPER AT 4'-0" CTS. ATOP THE METAL STAY-IN-PLACE FORMS TO SUPPORT THE BOTTOM MAT OF 'A' BARS. WHEN USING REMOVABLE FORMS, PROVIDE CONTINUOUS HIGH CHAIRS FOR METAL DECK (C.H.C.M.) @ 4'-0" CTS. WITH A HEIGHT TO SUPPORT THE BOTTOM MAT OF 'A' BARS A CLEAR DISTANCE OF 2/2" ABOVE THE TOP OF THE REMOVABLE FORM.

LONGITUDINAL STEEL MAY BE SHIFTED SLIGHTLY, AS NECESSARY, TO AVOID INTERFERENCE WITH STIRRUPS IN PRESTRESSED CONCRETE GIRDERS.

NO CHAMFER IS REQUIRED ON CORNERS OF GIRDER BUILDUPS.

PREVIOUSLY CAST CONCRETE IN A CONTINUOUS UNIT SHALL HAVE ATTAINED A MINIMUM COMPRESSIVE STRENGTH OF 3,000 PSI BEFORE ADDITIONAL CONCRETE IS CAST IN THE UNIT.

#5 G1 BAR MAY BE SHIFTED SLIGHTLY, AS NECESSARY TO CLEAR REINFORCING STEEL AND STIRRUPS.

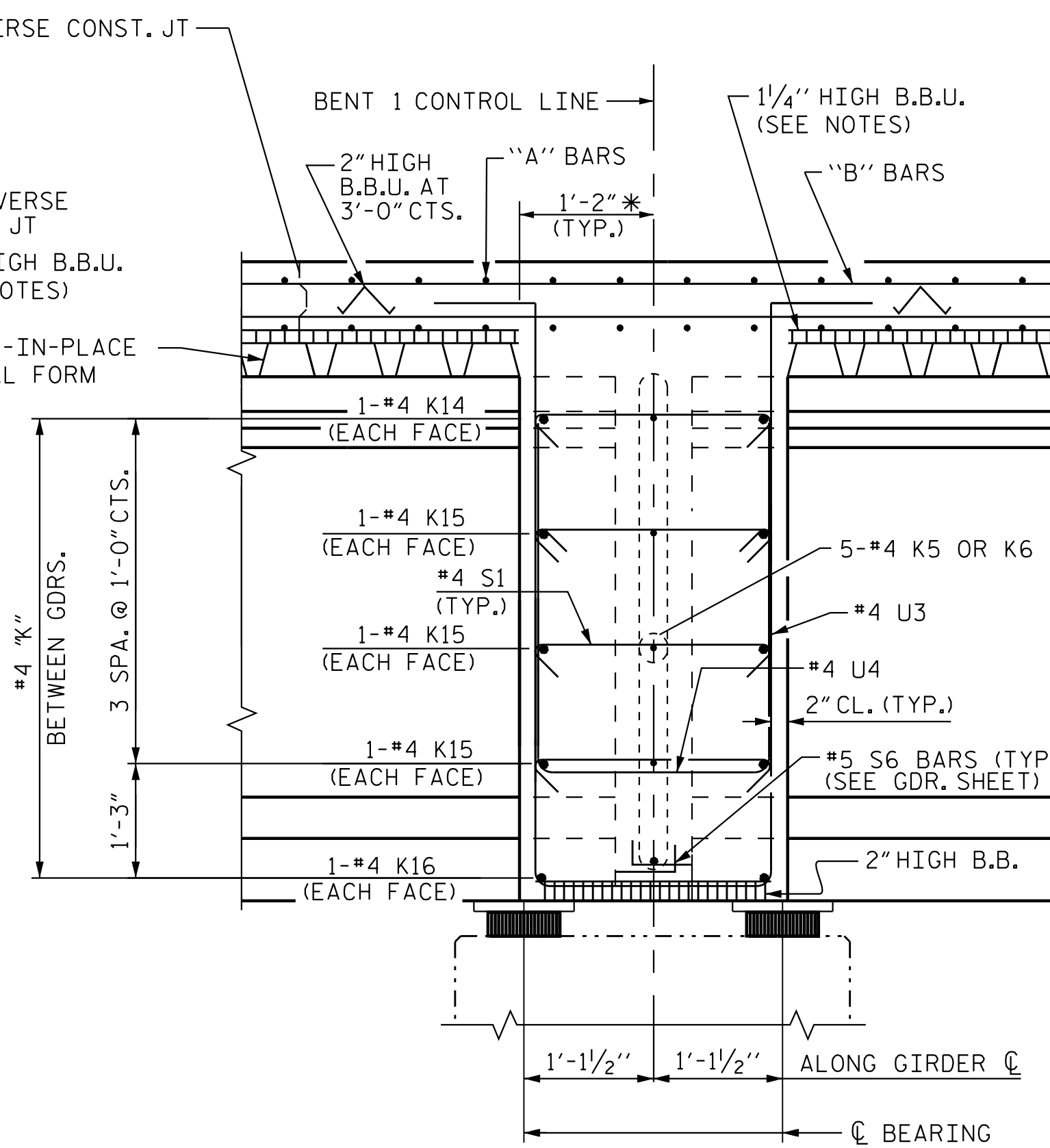


SECTION B-B

SECTION THRU INTEGRAL END BENT DIAPHRAGM
 SEE "PLAN OF SPANS - DIAPHRAGMS", SHEET 3 OF 3

#4 S2 & S3 BARS MAY BE REPOSITIONED AS NECESSARY TO CLEAR SLAB REINFORCING STEEL AND GIRDERS.

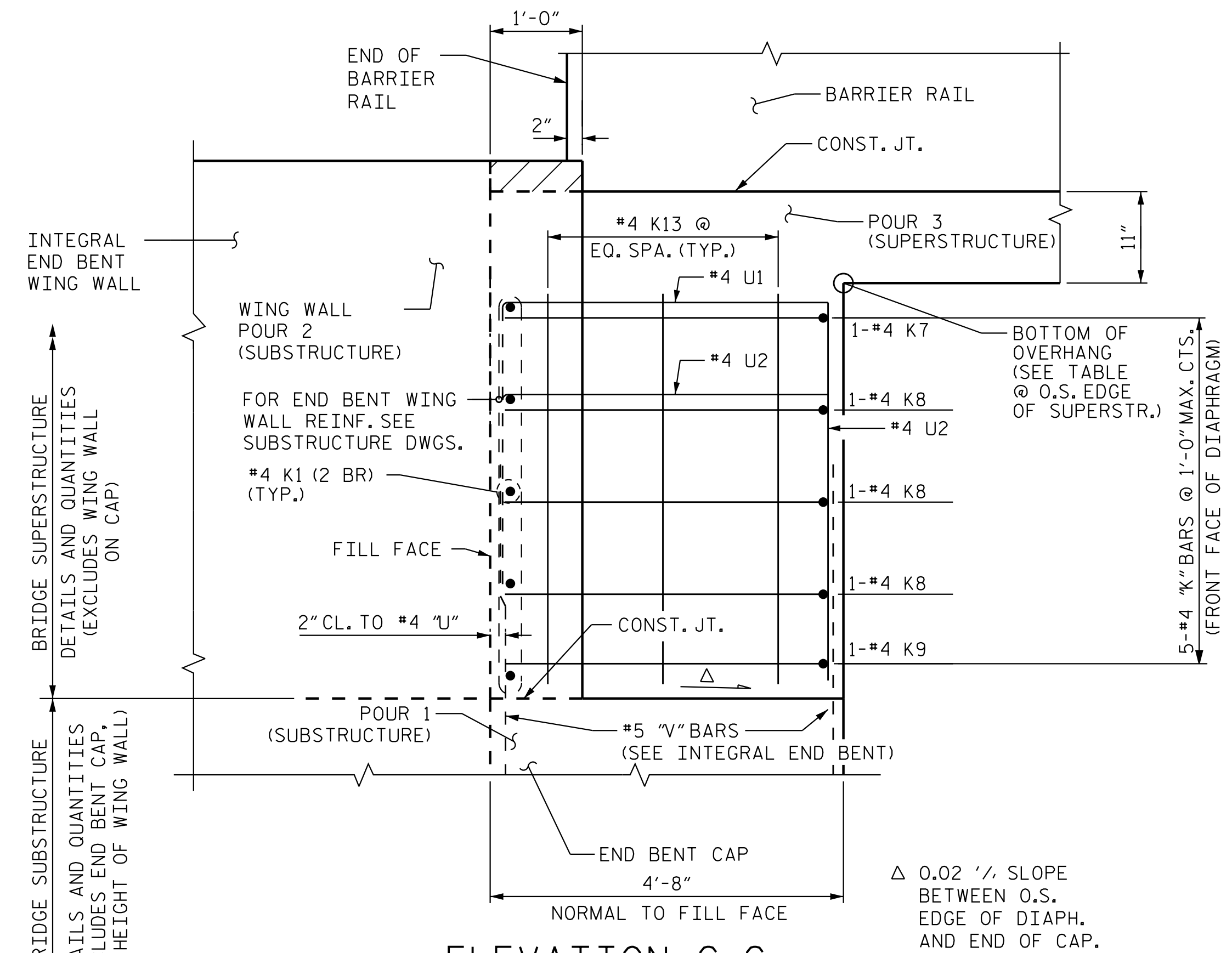
NOTE: 2 BR DENOTES 2 BAR RUN



SECTION A-A

SECTION THRU DIAPHRAGM @ INTERIOR BENT
 SEE "PLAN OF SPANS DETAILS - DIAPHRAGMS", SHEET 3 OF 3

* NORMAL TO CL BENT

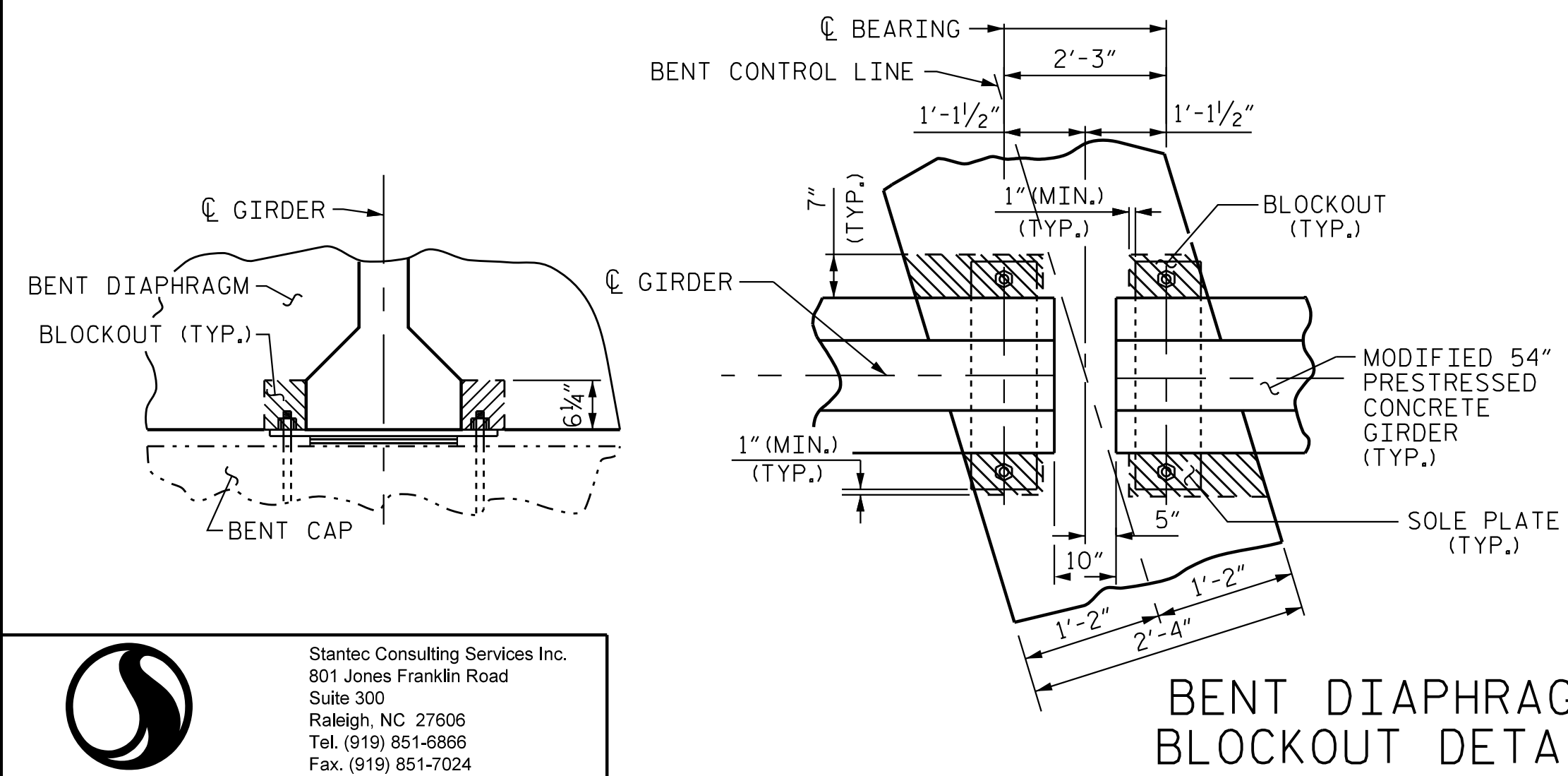


ELEVATION C-C

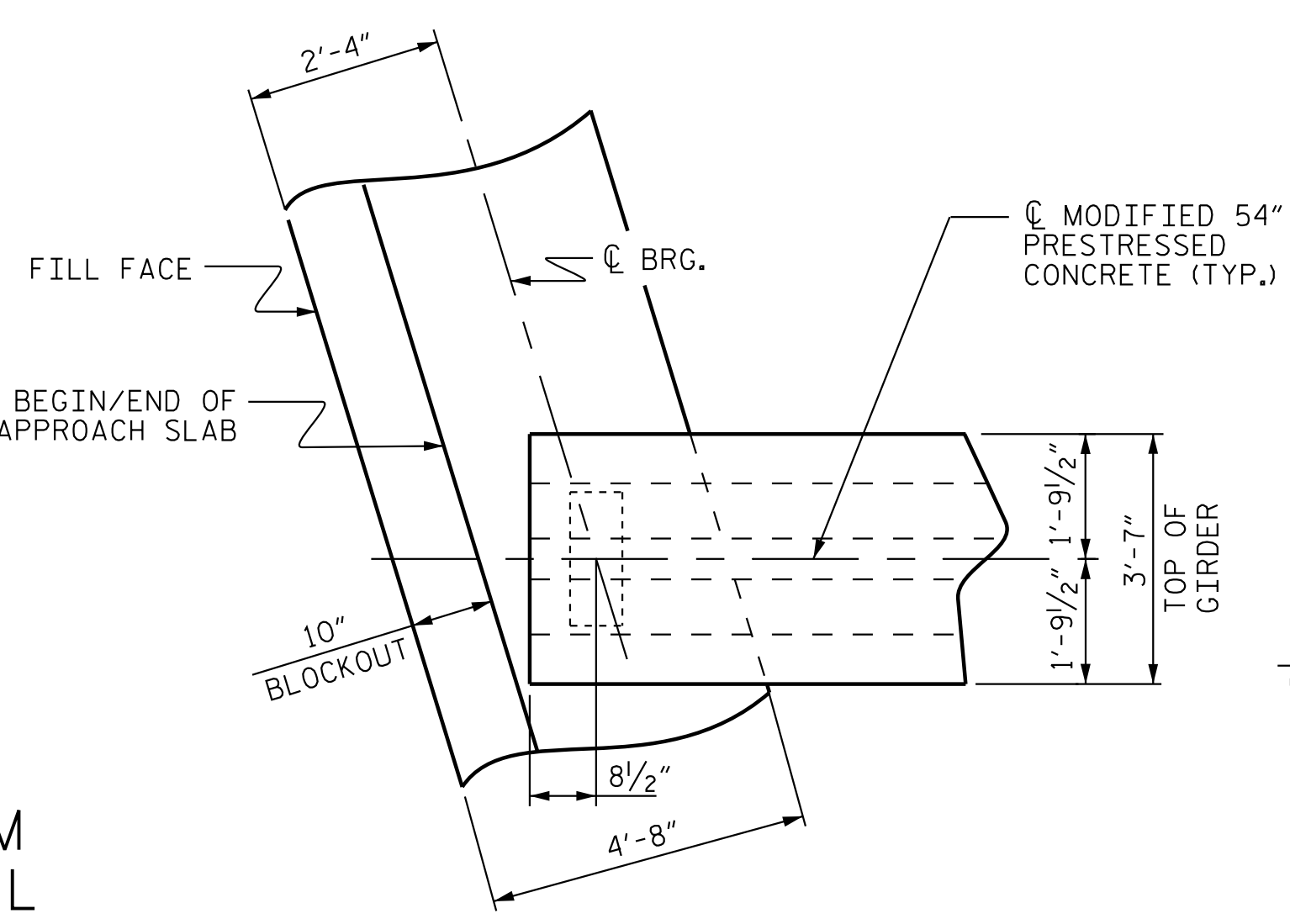
VIEW OF INTEGRAL END BENT BACKWALL AND DIAPHRAGM BEYOND O.S. EDGE OF DECK SLAB. SEE "PLAN OF SPAN DETAILS - DIAPHRAGMS", SHEET 3 OF 3

BOTTOM OF OVERHANG ELEV. @ OUTSIDE EDGE OF SUPERSTR.

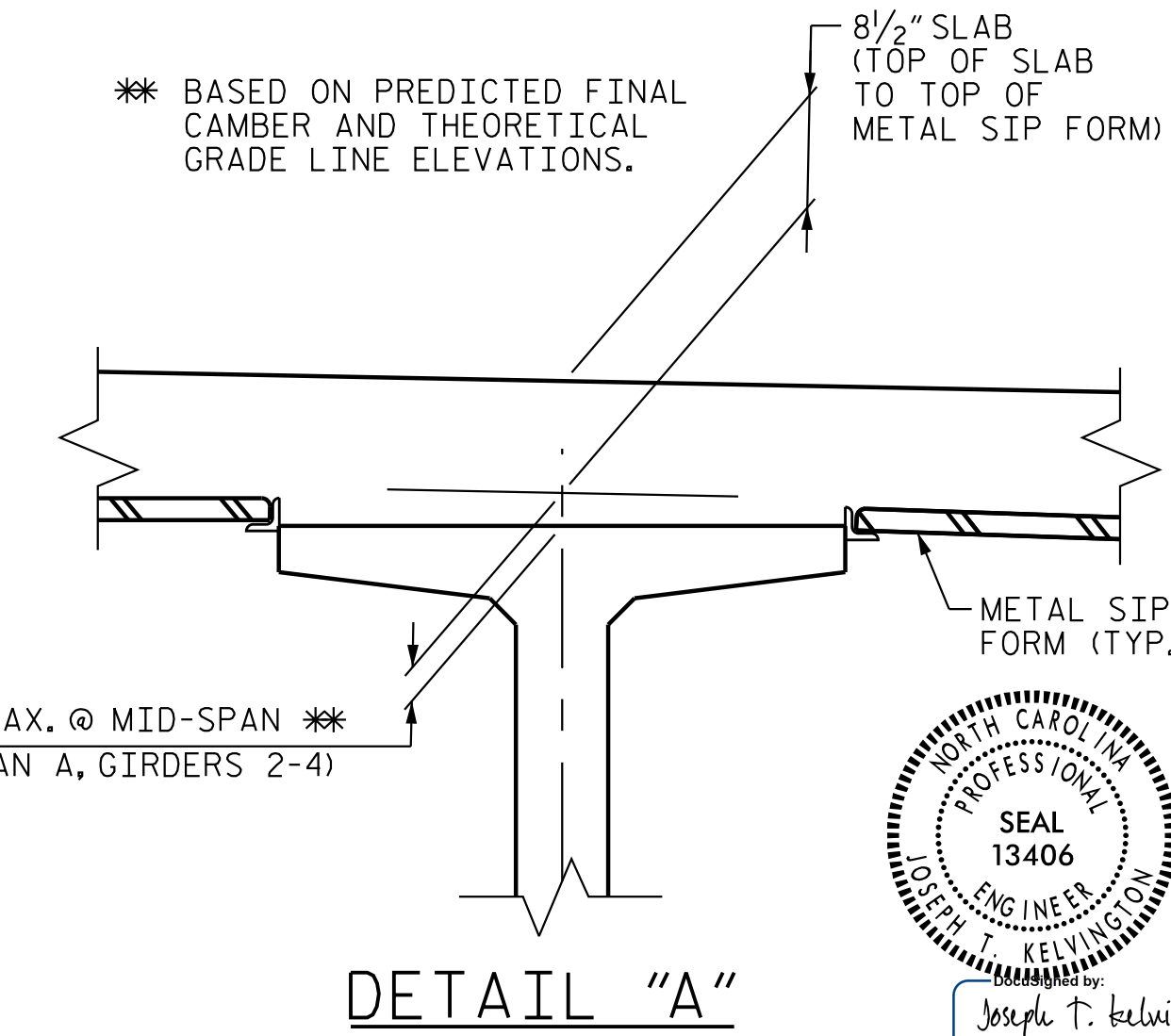
| OVERHANG | END BENT | ELEV. |
|------------|----------|--------|
| LEFT SIDE | 1 | 906.56 |
| RIGHT SIDE | 1 | 906.92 |
| LEFT SIDE | 2 | 909.95 |
| RIGHT SIDE | 2 | 910.04 |



BENT DIAPHRAGM BLOCKOUT DETAIL



PLAN OF INTEGRAL END BENT



DETAIL "A"

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DRAWN BY: J. B. GEILE DATE: 02/27/18
 CHECKED BY: M. B. ISENHOUR DATE: 04/17/18
 DESIGN ENGINEER OF RECORD: J.T. KELVINGTON DATE: 04/27/22



PROJECT NO. R-2707D
 CLEVELAND COUNTY
 STATION: 20+16.72 -Y2-

SHEET 3 OF 3
 DEPARTMENT OF TRANSPORTATION
 SUPERSTRUCTURE
 TYPICAL SECTION (DETAILS)

| REVISIONS | | | | | | SHEET NO. S2-08 |
|-----------|-----|-------|-----|-----|-------|--------------------|
| NO. | BY: | DATE: | NO. | BY: | DATE: | |
| 1 | | | 3 | | | TOTAL SHEETS 35 |
| 2 | | | 4 | | | |

DOCUMENT NOT CONSIDERED FINAL UNLESS ALL SIGNATURES COMPLETED