IDAHO TRANSPORTATION DEPARTMENT
BRIDGE ASSET MANAGEMENT

LOCAL AGENCY COMMUNICATION VERIFICATION

BRIDGE INFORMATION

Bridge Key:
District:
Features:

Team Leader:

BRIDGE OWNER/REPRESENTATIVE INFORMATION

Name:
Title:
Agency:

Contact Information:

BRIDGE CONDITION DISCUSSION

Comments:

☐ Discussed future projects in area with owner representative

All questions regarding the aforementioned program by the local agency were answered and all noteworthy bridge inventory changes were identified. Local Agency shall retain a copy for their records. Team leader send a copy of this signed form to Database Manager (patty.fish@itd.idaho.gov).

Signed_____ Team Leader Date:

Signed_____ Local Agency Date: